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## Senate

The Senate was not in session today. Its next meeting will be held on Monday, September 27, 2021, at 3 p.m.

## House of Representatives

FRIDAY, SEPTEMBER 24, 2021

The House met at 9 a.m. and was called to order by the Speaker.

### PRAYER

The Chaplain, the Reverend Margaret Grun Kibben, offered the following prayer:

Almighty God, call us again today to rejoice in hope. For all the challenges we have faced this week, votes passed or failed as we had wished or feared, long hours and tedious processes, You have tested our resolve and our faith in Your sovereignty. May we come to accept that we can find certainty in nothing save for a future redeemed by Your favor.

Remind us again to be patient in tribulation. Few things we have done this week have been easy. Much of what we believe in has been contested. Relationships have been strained. Even the civility of this body has been disputed.

Give us steady tempers, open minds, and resilient spirits trusting in Your providence to redeem us and our efforts through these trials.

Indulge us the persistence of our prayers. Respond to the constancy of our appeals. May our words always reflect our sincerity, and may our petitions serve the greater good and the welfare of our Nation.

In Your mercy is our deliverance, and in Your name we pray.

Amen.

### THE JOURNAL

The SPEAKER. Pursuant to section 11(a) of House Resolution 188, the Jour-

nal of the last day's proceedings is approved.

### PLEDGE OF ALLEGIANCE

The SPEAKER. Will the gentleman from Arizona (Mr. O'HALLERAN) come forward and lead the House in the Pledge of Allegiance.

Mr. O'HALLERAN led the Pledge of Allegiance as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

### ANNOUNCEMENT BY THE SPEAKER

The SPEAKER. The Chair will entertain up to five requests for 1-minute speeches on each side of the aisle.

### CELEBRATING MAJOR FANNIE McCLENDON'S 101ST BIRTHDAY

(Mr. O'HALLERAN asked and was given permission to address the House for 1 minute.)

Mr. O'HALLERAN. Madam Speaker, this week an Arizona legend turned 101 years old. Major Fannie McClendon, known to her friends as Fran, celebrated her 101st birthday on September 22.

Fran is one of seven known survivors of the 855 all-African American 6888th Central Postal Directory Battalion who served overseas during World War II.

Known as the Six Triple Eight, the women accomplished the incredible task of moving a 2-year backlog of un-

delivered mail to 7 million service-members. Working three shifts per day, they processed approximately 65,000 pieces of mail per shift.

Embracing their motto, "no mail, low morale", the women cleared the 2-year backlog of mail and packages in 3 months for U.S. military, civilians, and Red Cross workers throughout Europe. Their hard work and dedication brought hope and comfort to Americans around the world during some of our darkest times.

Today, join me in wishing Major McClendon a very happy 101st birthday.

### SUPPORT FOR TULSA CYBER PROGRAM IN NDAA

(Mr. HERN asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. HERN. Madam Speaker, today I rise in support of important funding included in this year's NDAA that will benefit an important initiative with respect to industrial control systems.

Specifically, this funding will advance a key concept in the Army's Smart Installations Strategy and begin to address critical research required to advance our capabilities in the area of testing the cybersecurity and our embedded industrial control systems.

The University of Tulsa in my district has significant capabilities in the area of cybersecurity research and has been engaged in attempting to address many of the issues associated with industrial control systems.

□ This symbol represents the time of day during the House proceedings, e.g., □ 1407 is 2:07 p.m.

Matter set in this typeface indicates words inserted or appended, rather than spoken, by a Member of the House on the floor.



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TU's research efforts in the area of cybersecurity protection are unmatched in the Nation. They play an important role in our national security and deserve this essential funding.

I want to thank my colleague from Oklahoma City (Mrs. BICE) for her work on the House Armed Services Committee to ensure this funding was included in this year's NDAA.

#### ORLAND FIRE PROTECTION DISTRICT

(Ms. NEWMAN asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. NEWMAN. Madam Speaker, I rise today to honor the service of the brave first responders of the Orland Fire Protection District. Chief Michael Schofield's team represents the best of Illinois' Third District that we can possibly ask for.

These brave men and women are recognized not just as some of the best firefighters in Illinois but in the Nation. They exemplify what it means to be a public servant, and that is why I am honored to recognize them in the CONGRESSIONAL RECORD.

When I met with the members of the Orland Fire Protection District, their dedication to serving their community shone through. They told me how they adapted to the challenges of the COVID-19 pandemic by creating a first-of-its-kind response model. Their resourcefulness and innovation saved countless lives across the southwest suburbs.

I honor their leadership. I honor their dedication. And I honor their bravery.

Madam Speaker, I thank the Orland Fire Protection District for all they do, and I am proud every day to serve them as their Congressperson.

#### THE RIGHT TO LIFE IS ASSAULTED

(Mr. WEBSTER of Florida asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. WEBSTER of Florida. Madam Speaker, today this House will consider H.R. 3755. To me, this is a heart-breaking piece of legislation. It is an assault on the most fundamental right of a person, and that is the right to life.

Wednesday, I was thrilled with the news of the birth of my 21st grandchild. Little Liberty is her name, although she wasn't really little. She was 8 pounds, 14 ounces, and 22-and-a-half inches long. Her life has started; she was born. However, that right given by God happened long before the day she was born. She is a citizen of the United States, and because of that, she has that right.

H.R. 3755 is also an affront to human rights. I have heard many of my friends on the other side say: We only want in

rare and uncommon circumstances the right to have abortions.

But this bill does not do that. It enables and promotes something far beyond that. It promotes the horrific practice of eugenics by ensuring that abortions are allowed in cases of a possible congenital disorder.

#### HONORING THE MEMORY OF GLADYS SHIPMAN

(Ms. MANNING asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. MANNING. Madam Speaker, I rise today to honor the memory of the late Gladys Shipman, a lifelong champion of civil rights and pillar in the Greensboro community.

Gladys began her journey as a civil rights pioneer with protests at the Woolworth's lunch counter where the Greensboro Four Sit-In occurred. By the time of her passing, she was a board member on the International Civil Rights Center & Museum in that very same building.

Gladys was the first woman to lead the Greensboro NAACP, served on the city of Greensboro Human Relations Commission, and held many other influential positions.

As a businesswoman, civil rights leader, mother, grandmother, and great-grandmother, she approached every aspect of life with care and compassion. Her passion for social justice and equality guided her as she improved the lives of those around her and inspired future generations to carry on her legacy.

Madam Speaker, I am thankful for Gladys' steadfast commitment to bettering our community, and I am inspired by her kind and determined nature. Her memory will be a blessing for all who knew her.

#### TOURING THE FOURTH DISTRICT OF IOWA

(Mr. FEENSTRA asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. FEENSTRA. Madam Speaker, last week I officially completed my 39 county tour for 2021, visiting all 39 counties at least twice so far this year. Whether it was speaking to farmers, manufacturers, Main Street business owners, families, educators, or students, I have enjoyed listening to folks all through the Fourth District.

I heard from folks across the district concerned with reckless spending, especially the Democrats' \$3.5 trillion tax and spending spree.

In Palo Alto County I met a sixth-generation farmer who was concerned President Biden's plan to eliminate stepped-up basis would threaten his family farm. I heard this concern everywhere I went, which is why I have fought so hard to put a stop to this supercharged death tax.

I will continue to be a passionate advocate for the Fourth District, especially when it comes to defending the men and women who feed and fuel the world.

#### COMMUNITY VIOLENCE INTERVENTION IN THE BUILD BACK BETTER PLAN

(Mr. HORSFORD asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. HORSFORD. Madam Speaker, I rise today as a champion for the Build Back Better Act's \$5 billion investment in community violence intervention.

Last year, our country witnessed the largest spike in murder rates since national recordkeeping began in 1960. In my home city of Las Vegas, murders are up nearly 70 percent this year already.

This violence doesn't happen in a vacuum. It happens when people don't have hope or faith that there are better paths forward, to make money to resolve a conflict, or to feel safe.

For decades, politicians in this Chamber have stoked fear about urban crime to divide us while refusing to invest in real solutions. I lost my father to gun violence, so this is not about politics for me. We need to focus on stopping the bloodshed before it starts.

This summer, I introduced the Break the Cycle of Violence Act along with my colleagues proposing \$5 billion in funding that is now part of the Build Back Better Act. This money will invest in proven, community-based violence intervention programs to build safer communities.

This is about saving lives, and our constituents are counting on us to get this done.

#### BIDEN'S BORDER CRISIS

(Mr. ALLEN asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. ALLEN. Madam Speaker, this country is going through crisis after crisis.

The Border Patrol apprehended over 200,000 immigrants at our southern border last month. August's border numbers are alarming and mark a 21-year high. The Biden administration cannot blame this surge on seasonal trends as this number is a 317 percent increase from the same time last year.

So what is the Biden administration doing to stop this ongoing border surge?

Absolutely nothing.

In fact, over 43,000 illegal immigrants were released into the U.S. last month.

This is a national security crisis. We don't know who is pouring across our border, and, unfortunately, this is a humanitarian crisis to the fullest extent.

Just last week, we saw tens of thousands of Haitians make their way to

Del Rio with reports on the ground describing horrific conditions in their makeshift camp as two women reportedly gave birth—including one who later tested positive for COVID-19.

This crisis is one of the worst in history. It is time to finish the wall, end catch and release, and secure our border.

□ 0915

### THE RIGHT TO ABORTION IS UNDER ATTACK

(Ms. BONAMICI asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. BONAMICI. Madam Speaker, I rise in strong support of the Women's Health Protection Act because the right to abortion, a right grounded in privacy, is under attack.

When people have the freedom to make their own personal decisions about whether and when to become a parent, they are more likely to attain their educational goals, maintain job mobility, achieve economic security. But unfortunately, politicians in many States, and in this very body, want to invade privacy and deny autonomy.

We cannot take the right to choose for granted. I urge passage of this vital legislation because we refuse to be dragged back to the dangerous days before *Roe v. Wade*. I urge everyone to support the Women's Health Protection Act.

### EFFORTS TO REMOVE PRO-LIFE PROTECTIONS

(Mr. BERGMAN asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. BERGMAN. Madam Speaker, I rise today in intensely strong opposition to efforts to remove longstanding pro-life protections and potentially even the ban on taxpayer funding for abortions as evidenced by the bill Democrats want us to pass in a few hours.

With a single move, this legislation would eliminate 40 years of bipartisan consensus in Washington in State capitals across the country to protect the health of pregnant women and the unborn.

In addition to allowing elective late-term abortions and hampering access to proper care at abortion clinics in the case of emergencies, this bill would preempt any State laws that prevent sex-based or disability status-based abortion decisions. Medical professionals could also be forced to conduct abortions, despite moral objections.

Our Nation faces a host of crises, most of which are self-inflicted. I implore my colleagues to reject this bill and get back to the people's work.

### COMMUNICATION FROM THE CLERK OF THE HOUSE

The SPEAKER pro tempore (Ms. SPEIER) laid before the House the following communication from the Clerk of the House of Representatives:

OFFICE OF THE CLERK.

HOUSE OF REPRESENTATIVES,

Washington, DC, September 24, 2021.

Hon. NANCY PELOSI,

Speaker, House of Representatives,  
Washington, DC.

DEAR MADAM SPEAKER: Pursuant to the permission granted in Clause 2(h) of Rule II of the Rules of the U.S. House of Representatives, the Clerk received the following message from the Secretary of the Senate on September 24, 2021, at 8:17 a.m.:

That the Senate agreed to Relative to the death of Robert Britton "Bob" Dove, Parliamentarian Emeritus of the United States Senate S. Res. 386.

That the Senate passed without amendment H.R. 5293.

That the Senate agreed to without amendment H. Con. Res. 41.

With best wishes, I am,

Sincerely,

KEVIN F. MCCUMBER,  
Deputy Clerk.

### WOMEN'S HEALTH PROTECTION ACT OF 2021

Mr. PALLONE. Madam Speaker, pursuant to House Resolution 667, I call up the bill (H.R. 3755) to protect a person's ability to determine whether to continue or end a pregnancy, and to protect a health care provider's ability to provide abortion services, and ask for its immediate consideration in the House.

The Clerk read the title of the bill.

The SPEAKER pro tempore. Pursuant to House Resolution 677, the amendment printed in part A of House Report 117-125 shall be considered as adopted.

The bill, as amended, is considered read.

The text of the bill, as amended, is as follows:

H.R. 3755

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

#### SECTION 1. SHORT TITLE.

*This Act may be cited as the "Women's Health Protection Act of 2021".*

#### SEC. 2. FINDINGS AND PURPOSE.

(a) FINDINGS.—Congress finds the following:

(1) Abortion services are essential to health care and access to those services is central to people's ability to participate equally in the economic and social life of the United States. Abortion access allows people who are pregnant to make their own decisions about their pregnancies, their families, and their lives.

(2) Since 1973, the Supreme Court repeatedly has recognized the constitutional right to terminate a pregnancy before fetal viability, and to terminate a pregnancy after fetal viability where it is necessary, in the good-faith medical judgment of the treating health care professional, for the preservation of the life or health of the person who is pregnant.

(3) Nonetheless, access to abortion services has been obstructed across the United States in various ways, including blockades of health care facilities and associated violence, prohibitions of, and restrictions on, insurance coverage; pa-

rental involvement laws (notification and consent); restrictions that shame and stigmatize people seeking abortion services; and medically unnecessary regulations that neither confer any health benefit nor further the safety of abortion services, but which harm people by delaying, complicating access to, and reducing the availability of, abortion services.

(4) Reproductive justice requires every individual to have the right to make their own decisions about having children regardless of their circumstances and without interference and discrimination. Reproductive Justice is a human right that can and will be achieved when all people, regardless of actual or perceived race, color, national origin, immigration status, sex (including gender identity, sex stereotyping, or sexual orientation), age, or disability status have the economic, social, and political power and resources to define and make decisions about their bodies, health, sexuality, families, and communities in all areas of their lives, with dignity and self-determination.

(5) Reproductive justice seeks to address restrictions on reproductive health, including abortion, that perpetuate systems of oppression, lack of bodily autonomy, white supremacy, and anti-Black racism. This violent legacy has manifested in policies including enslavement, rape, and experimentation on Black women; forced sterilizations; medical experimentation on low-income women's reproductive systems; and the forcible removal of Indigenous children. Access to equitable reproductive health care, including abortion services, has always been deficient in the United States for Black, Indigenous, and other People of Color (BIPOC) and their families.

(6) The legacy of restrictions on reproductive health, rights, and justice is not a dated vestige of a dark history. Presently, the harms of abortion-specific restrictions fall especially heavily on people with low incomes, BIPOC, immigrants, young people, people with disabilities, and those living in rural and other medically underserved areas. Abortion-specific restrictions are even more compounded by the ongoing criminalization of people who are pregnant, including those who are incarcerated, living with HIV, or with substance-use disorders. These communities already experience health disparities due to social, political, and environmental inequities, and restrictions on abortion services exacerbate these harms. Removing medically unjustified restrictions on abortion services would constitute one important step on the path toward realizing Reproductive Justice by ensuring that the full range of reproductive health care is accessible to all who need it.

(7) Abortion-specific restrictions are a tool of gender oppression, as they target health care services that are used primarily by women. These paternalistic restrictions rely on and reinforce harmful stereotypes about gender roles, women's decision-making, and women's need for protection instead of support, undermining their ability to control their own lives and well-being. These restrictions harm the basic autonomy, dignity, and equality of women, and their ability to participate in the social and economic life of the Nation.

(8) The terms "woman" and "women" are used in this bill to reflect the identity of the majority of people targeted and affected by restrictions on abortion services, and to address squarely the targeted restrictions on abortion, which are rooted in misogyny. However, access to abortion services is critical to the health of every person capable of becoming pregnant. This Act is intended to protect all people with the capacity for pregnancy—cisgender women, transgender men, non-binary individuals, those who identify with a different gender, and others—who are unjustly harmed by restrictions on abortion services.

(9) Since 2011, States and local governments have passed nearly 500 restrictions singling out

health care providers who offer abortion services, interfering with their ability to provide those services and the patients' ability to obtain those services.

(10) Many State and local governments have imposed restrictions on the provision of abortion services that are neither evidence-based nor generally applicable to the medical profession or to other medically comparable outpatient gynecological procedures, such as endometrial ablations, dilation and curettage for reasons other than abortion, hysteroscopies, loop electrosurgical excision procedures, or other analogous non-gynecological procedures performed in similar outpatient settings including vasectomy, sigmoidoscopy, and colonoscopy.

(11) Abortion is essential health care and one of the safest medical procedures in the United States. An independent, comprehensive review of the state of science on the safety and quality of abortion services, published by the National Academies of Sciences, Engineering, and Medicine in 2018, found that abortion in the United States is safe and effective and that the biggest threats to the quality of abortion services in the United States are State regulations that create barriers to care. These abortion-specific restrictions conflict with medical standards and are not supported by the recommendations and guidelines issued by leading reproductive health care professional organizations including the American College of Obstetricians and Gynecologists, the Society of Family Planning, the National Abortion Federation, the World Health Organization, and others.

(12) Many abortion-specific restrictions do not confer any health or safety benefits on the patient. Instead, these restrictions have the purpose and effect of unduly burdening people's personal and private medical decisions to end their pregnancies by making access to abortion services more difficult, invasive, and costly, often forcing people to travel significant distances and make multiple unnecessary visits to the provider, and in some cases, foreclosing the option altogether. For example, a 2018 report from the University of California San Francisco's Advancing New Standards in Reproductive Health research group found that in 27 cities across the United States, people have to travel more than 100 miles in any direction to reach an abortion provider.

(13) An overwhelming majority of abortions in the United States are provided in clinics, not hospitals, but the large majority of counties throughout the United States have no clinics that provide abortion.

(14) These restrictions additionally harm people's health by reducing access not only to abortion services but also to other essential health care services offered by many of the providers targeted by the restrictions, including—

(A) screenings and preventive services, including contraceptive services;

(B) testing and treatment for sexually transmitted infections;

(C) LGBTQ health services; and

(D) referrals for primary care, intimate partner violence prevention, prenatal care and adoption services.

(15) The cumulative effect of these numerous restrictions has been to severely limit the availability of abortion services in some areas, creating a patchwork system where access to abortion services is more available in some States than in others. A 2019 report from the Government Accountability Office examining State Medicaid compliance with abortion coverage requirements analyzed seven key challenges (identified both by health care providers and research literature) and their effect on abortion access, and found that access to abortion services varied across the States and even within a State.

(16) International human rights law recognizes that access to abortion is intrinsically linked to the rights to life, health, equality and non-discrimination, privacy, and freedom from

ill-treatment. United Nations (UN) human rights treaty monitoring bodies have found that legal abortion services, like other reproductive health care services, must be available, accessible, affordable, acceptable, and of good quality. UN human rights treaty bodies have likewise condemned medically unnecessary barriers to abortion services, including mandatory waiting periods, biased counseling requirements, and third-party authorization requirements.

(17) Core human rights treaties ratified by the United States protect access to abortion. For example, in 2018, the UN Human Rights Committee, which oversees implementation of the ICCPR, made clear that the right to life, enshrined in Article 6 of the ICCPR, at a minimum requires governments to provide safe, legal, and effective access to abortion where a person's life and health is at risk, or when carrying a pregnancy to term would cause substantial pain or suffering. The Committee stated that governments must not impose restrictions on abortion which subject women and girls to physical or mental pain or suffering, discriminate against them, arbitrarily interfere with their privacy, or place them at risk of undertaking unsafe abortions. Furthermore, the Committee stated that governments should remove existing barriers that deny effective access to safe and legal abortion, refrain from introducing new barriers to abortion, and prevent the stigmatization of those seeking abortion.

(18) UN independent human rights experts have expressed particular concern about barriers to abortion services in the United States. For example, at the conclusion of his 2017 visit to the United States, the UN Special Rapporteur on extreme poverty and human rights noted concern that low-income women face legal and practical obstacles to exercising their constitutional right to access abortion services, trapping many women in cycles of poverty. Similarly, in May 2020, the UN Working Group on discrimination against women and girls, along with other human rights experts, expressed concern that some states had manipulated the COVID-19 crisis to restrict access to abortion, which the experts recognized as “the latest example illustrating a pattern of restrictions and retrogressions in access to legal abortion care across the country” and reminded U.S. authorities that abortion care constitutes essential health care that must remain available during and after the pandemic. They noted that barriers to abortion access exacerbate systemic inequalities and cause particular harm to marginalized communities, including low-income people, people of color, immigrants, people with disabilities, and LGBTQ people.

(19) Abortion-specific restrictions affect the cost and availability of abortion services, and the settings in which abortion services are delivered. People travel across State lines and otherwise engage in interstate commerce to access this essential medical care, and more would be forced to do so absent this Act. Likewise, health care providers travel across State lines and otherwise engage in interstate commerce in order to provide abortion services to patients, and more would be forced to do so absent this Act.

(20) Health care providers engage in a form of economic and commercial activity when they provide abortion services, and there is an interstate market for abortion services.

(21) Abortion restrictions substantially affect interstate commerce in numerous ways. For example, to provide abortion services, health care providers engage in interstate commerce to purchase medicine, medical equipment, and other necessary goods and services. To provide and assist others in providing abortion services, health care providers engage in interstate commerce to obtain and provide training. To provide abortion services, health care providers employ and obtain commercial services from doctors, nurses, and other personnel who engage in interstate commerce and travel across State lines.

(22) It is difficult and time and resource-consuming for clinics to challenge State laws that burden or impede abortion services. Litigation that blocks one abortion restriction may not prevent a State from adopting other similarly burdensome abortion restrictions or using different methods to burden or impede abortion services. There is a history and pattern of States passing successive and different laws that unduly burden abortion services.

(23) When a health care provider ceases providing abortion services as a result of burdensome and medically unnecessary regulations, it is often difficult or impossible for that health care provider to recommence providing those abortion services, and difficult or impossible for other health care providers to provide abortion services that restore or replace the ceased abortion services.

(24) Health care providers are subject to license laws in various jurisdictions, which are not affected by this Act except as provided in this Act.

(25) Congress has the authority to enact this Act to protect abortion services pursuant to—

(A) its powers under the commerce clause of section 8 of article I of the Constitution of the United States;

(B) its powers under section 5 of the Fourteenth Amendment to the Constitution of the United States to enforce the provisions of section 1 of the Fourteenth Amendment; and

(C) its powers under the necessary and proper clause of section 8 of Article I of the Constitution of the United States.

(26) Congress has used its authority in the past to protect access to abortion services and health care providers' ability to provide abortion services. In the early 1990s, protests and blockades at health care facilities where abortion services were provided, and associated violence, increased dramatically and reached crisis level, requiring Congressional action. Congress passed the Freedom of Access to Clinic Entrances Act (Public Law 103-259; 108 Stat. 694) to address that situation and protect physical access to abortion services.

(27) Congressional action is necessary to put an end to harmful restrictions, to federally protect access to abortion services for everyone regardless of where they live, and to protect the ability of health care providers to provide these services in a safe and accessible manner.

(b) PURPOSE.—It is the purpose of this Act—

(1) to permit health care providers to provide abortion services without limitations or requirements that single out the provision of abortion services for restrictions that are more burdensome than those restrictions imposed on medically comparable procedures, do not significantly advance reproductive health or the safety of abortion services, and make abortion services more difficult to access;

(2) to promote access to abortion services and women's ability to participate equally in the economic and social life of the United States; and

(3) to invoke Congressional authority, including the powers of Congress under the commerce clause of section 8 of article I of the Constitution of the United States, its powers under section 5 of the Fourteenth Amendment to the Constitution of the United States to enforce the provisions of section 1 of the Fourteenth Amendment, and its powers under the necessary and proper clause of section 8 of article I of the Constitution of the United States.

### SEC. 3. DEFINITIONS.

In this Act:

(1) **ABORTION SERVICES.**—The term “abortion services” means an abortion and any medical or non-medical services related to and provided in conjunction with an abortion (whether or not provided at the same time or on the same day as the abortion).

(2) **GOVERNMENT.**—The term “government” includes each branch, department, agency, instrumentality, and official of the United States or a State.

(3) **HEALTH CARE PROVIDER.**—The term “health care provider” means any entity or individual (including any physician, certified nurse-midwife, nurse practitioner, and physician assistant) that—

(A) is engaged or seeks to engage in the delivery of health care services, including abortion services, and

(B) if required by law or regulation to be licensed or certified to engage in the delivery of such services—

(i) is so licensed or certified, or

(ii) would be so licensed or certified but for their past, present, or potential provision of abortion services permitted by section 4.

(4) **MEDICALLY COMPARABLE PROCEDURE.**—The term “medically comparable procedures” means medical procedures that are similar in terms of health and safety risks to the patient, complexity, or the clinical setting that is indicated.

(5) **PREGNANCY.**—The term “pregnancy” refers to the period of the human reproductive process beginning with the implantation of a fertilized egg.

(6) **STATE.**—The term “State” includes the District of Columbia, the Commonwealth of Puerto Rico, and each territory and possession of the United States, and any subdivision of any of the foregoing, including any unit of local government, such as a county, city, town, village, or other general purpose political subdivision of a State.

(7) **VIABILITY.**—The term “viability” means the point in a pregnancy at which, in the good-faith medical judgment of the treating health care provider, based on the particular facts of the case before the health care provider, there is a reasonable likelihood of sustained fetal survival outside the uterus with or without artificial support.

#### SEC. 4. PERMITTED SERVICES.

(a) **GENERAL RULE.**—A health care provider has a statutory right under this Act to provide abortion services, and may provide abortion services, and that provider’s patient has a corresponding right to receive such services, without any of the following limitations or requirements:

(1) A requirement that a health care provider perform specific tests or medical procedures in connection with the provision of abortion services, unless generally required for the provision of medically comparable procedures.

(2) A requirement that the same health care provider who provides abortion services also perform specified tests, services, or procedures prior to or subsequent to the abortion.

(3) A requirement that a health care provider offer or provide the patient seeking abortion services medically inaccurate information in advance of or during abortion services.

(4) A limitation on a health care provider’s ability to prescribe or dispense drugs based on current evidence-based regimens or the provider’s good-faith medical judgment, other than a limitation generally applicable to the medical profession.

(5) A limitation on a health care provider’s ability to provide abortion services via telemedicine, other than a limitation generally applicable to the provision of medical services via telemedicine.

(6) A requirement or limitation concerning the physical plant, equipment, staffing, or hospital transfer arrangements of facilities where abortion services are provided, or the credentials or hospital privileges or status of personnel at such facilities, that is not imposed on facilities or the personnel of facilities where medically comparable procedures are performed.

(7) A requirement that, prior to obtaining an abortion, a patient make one or more medically unnecessary in-person visits to the provider of abortion services or to any individual or entity that does not provide abortion services.

(8) A prohibition on abortion at any point or points in time prior to fetal viability, including

a prohibition or restriction on a particular abortion procedure.

(9) A prohibition on abortion after fetal viability when, in the good-faith medical judgment of the treating health care provider, continuation of the pregnancy would pose a risk to the pregnant patient’s life or health.

(10) A limitation on a health care provider’s ability to provide immediate abortion services when that health care provider believes, based on the good-faith medical judgment of the provider, that delay would pose a risk to the patient’s health.

(11) A requirement that a patient seeking abortion services at any point or points in time prior to fetal viability disclose the patient’s reason or reasons for seeking abortion services, or a limitation on the provision or obtaining of abortion services at any point or points in time prior to fetal viability based on any actual, perceived, or potential reason or reasons of the patient for obtaining abortion services, regardless of whether the limitation is based on a health care provider’s degree of actual or constructive knowledge of such reason or reasons.

(b) **OTHER LIMITATIONS OR REQUIREMENTS.**—The statutory right specified in subsection (a) shall not be limited or otherwise infringed through, in addition to the limitations and requirements specified in paragraphs (1) through (11) of subsection (a), any limitation or requirement that—

(1) is the same as or similar to one or more of the limitations or requirements described in subsection (a); or

(2) both—

(A) expressly, effectively, implicitly, or as implemented singles out the provision of abortion services, health care providers who provide abortion services, or facilities in which abortion services are provided; and

(B) impedes access to abortion services.

(c) **FACTORS FOR CONSIDERATION.**—Factors a court may consider in determining whether a limitation or requirement impedes access to abortion services for purposes of subsection (b)(2)(B) include the following:

(1) Whether the limitation or requirement, in a provider’s good-faith medical judgment, interferes with a health care provider’s ability to provide care and render services, or poses a risk to the patient’s health or safety.

(2) Whether the limitation or requirement is reasonably likely to delay or deter some patients in accessing abortion services.

(3) Whether the limitation or requirement is reasonably likely to directly or indirectly increase the cost of providing abortion services or the cost for obtaining abortion services (including costs associated with travel, childcare, or time off work).

(4) Whether the limitation or requirement is reasonably likely to have the effect of necessitating a trip to the offices of a health care provider that would not otherwise be required.

(5) Whether the limitation or requirement is reasonably likely to result in a decrease in the availability of abortion services in a given State or geographic region.

(6) Whether the limitation or requirement imposes penalties that are not imposed on other health care providers for comparable conduct or failure to act, or that are more severe than penalties imposed on other health care providers for comparable conduct or failure to act.

(7) The cumulative impact of the limitation or requirement combined with other new or existing limitations or requirements.

(d) **EXCEPTION.**—To defend against a claim that a limitation or requirement violates a health care provider’s or patient’s statutory rights under subsection (b), a party must establish, by clear and convincing evidence, that—

(1) the limitation or requirement significantly advances the safety of abortion services or the health of patients; and

(2) the safety of abortion services or the health of patients cannot be advanced by a less restrictive alternative measure or action.

#### SEC. 5. APPLICABILITY AND PREEMPTION.

(a) **IN GENERAL.**—

(1) Except as stated under subsection (b), this Act supersedes and applies to the law of the Federal Government and each State government, and the implementation of such law, whether statutory, common law, or otherwise, and whether adopted before or after the date of enactment of this Act, and neither the Federal Government nor any State government shall administer, implement, or enforce any law, rule, regulation, standard, or other provision having the force and effect of law that conflicts with any provision of this Act, notwithstanding any other provision of Federal law, including the Religious Freedom Restoration Act of 1993 (42 U.S.C. 2000bb et seq.).

(2) Federal statutory law adopted after the date of the enactment of this Act is subject to this Act unless such law explicitly excludes such application by reference to this Act.

(b) **LIMITATIONS.**—The provisions of this Act shall not supersede or apply to—

(1) laws regulating physical access to clinic entrances;

(2) insurance or medical assistance coverage of abortion services;

(3) the procedure described in section 1531(b)(1) of title 18, United States Code; or

(4) generally applicable State contract law.

(c) **DEFENSE.**—In any cause of action against an individual or entity who is subject to a limitation or requirement that violates this Act, in addition to the remedies specified in section 8, this Act shall also apply to, and may be raised as a defense by, such an individual or entity.

#### SEC. 6. EFFECTIVE DATE.

This Act shall take effect immediately upon the date of enactment of this Act. This Act shall apply to all restrictions on the provision of, or access to, abortion services whether the restrictions are enacted or imposed prior to or after the date of enactment of this Act, except as otherwise provided in this Act.

#### SEC. 7. RULES OF CONSTRUCTION.

(a) **IN GENERAL.**—In interpreting the provisions of this Act, a court shall liberally construe such provisions to effectuate the purposes of the Act.

(b) **RULE OF CONSTRUCTION.**—Nothing in this Act shall be construed to authorize any government to interfere with a person’s ability to terminate a pregnancy, to diminish or in any way negatively affect a person’s constitutional right to terminate a pregnancy, or to displace any other remedy for violations of the constitutional right to terminate a pregnancy.

(c) **OTHER INDIVIDUALS CONSIDERED AS GOVERNMENT OFFICIALS.**—Any person who, by operation of a provision of Federal or State law, is permitted to implement or enforce a limitation or requirement that violates section 4 of this Act shall be considered a government official for purposes of this Act.

#### SEC. 8. ENFORCEMENT.

(a) **ATTORNEY GENERAL.**—The Attorney General may commence a civil action on behalf of the United States against any State that violates, or against any government official (including a person described in section 7(c)) that implements or enforces a limitation or requirement that violates, section 4. The court shall hold unlawful and set aside the limitation or requirement if it is in violation of this Act.

(b) **PRIVATE RIGHT OF ACTION.**—

(1) **IN GENERAL.**—Any individual or entity, including any health care provider or patient, adversely affected by an alleged violation of this Act, may commence a civil action against any State that violates, or against any government official (including a person described in section 7(c)) that implements or enforces a limitation or requirement that violates, section 4. The court shall hold unlawful and set aside the limitation or requirement if it is in violation of this Act.

(2) **HEALTH CARE PROVIDER.**—A health care provider may commence an action for relief on

its own behalf, on behalf of the provider's staff, and on behalf of the provider's patients who are or may be adversely affected by an alleged violation of this Act.

(c) **EQUITABLE RELIEF.**—In any action under this section, the court may award appropriate equitable relief, including temporary, preliminary, or permanent injunctive relief.

(d) **COSTS.**—In any action under this section, the court shall award costs of litigation, as well as reasonable attorney's fees, to any prevailing plaintiff. A plaintiff shall not be liable to a defendant for costs or attorney's fees in any non-frivolous action under this section.

(e) **JURISDICTION.**—The district courts of the United States shall have jurisdiction over proceedings under this Act and shall exercise the same without regard to whether the party aggrieved shall have exhausted any administrative or other remedies that may be provided for by law.

(f) **ABROGATION OF STATE IMMUNITY.**—Neither a State that enforces or maintains, nor a government official (including a person described in section 7(c)) who is permitted to implement or enforce any limitation or requirement that violates section 4 shall be immune under the Tenth Amendment to the Constitution of the United States, the Eleventh Amendment to the Constitution of the United States, or any other source of law, from an action in a Federal or State court of competent jurisdiction challenging that limitation or requirement.

#### SEC. 9. SEVERABILITY.

If any provision of this Act, or the application of such provision to any person, entity, government, or circumstance, is held to be unconstitutional, the remainder of this Act, or the application of such provision to all other persons, entities, governments, or circumstances, shall not be affected thereby.

The SPEAKER pro tempore. The bill, as amended, shall be debatable for one hour equally divided and controlled by the chair and ranking minority member of the Committee on Energy and Commerce or their respective designees.

The gentleman from New Jersey (Mr. PALLONE) and the gentlewoman from Washington (Mrs. RODGERS) each will control 30 minutes.

The Chair recognizes the gentleman from New Jersey.

#### GENERAL LEAVE

Mr. PALLONE. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material on H.R. 3755.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from New Jersey?

There was no objection.

Mr. PALLONE. Madam Speaker, I yield myself 1 minute.

Madam Speaker, I rise today in strong support of H.R. 3755, the Women's Health Protection Act of 2021. The need to pass this legislation grows more urgent every day as anti-abortion extremists continue to pass harmful State laws that are intended to restrict access to reproductive healthcare and turn back the clock on the constitutionally protected right to abortion.

While the courts seem willing to chip away at decades of clear precedent guaranteeing the right for women to make their own healthcare decisions, it is vital we act to protect this right and enshrine it in Federal law.

This legislation simply ensures that no matter where they live, patients can access abortion services, and healthcare providers can provide this care without medically unnecessary and burdensome restrictions. And now is the time to pass this legislation and ensure women's healthcare rights are enshrined in Federal law.

I urge my colleagues to support this legislation today, and I reserve the balance of my time.

Mrs. RODGERS of Washington. Madam Speaker, I yield 2 minutes to the gentleman from Kentucky (Mr. GUTHRIE), the ranking member on the Health Subcommittee.

Mr. GUTHRIE. Madam Speaker, I rise in opposition to the Democrats' abortion on demand until birth bill.

The other night we were having a hearing in Energy and Commerce. It was on a similar—a different bill, but a similar topic. And a lot of the rhetoric coming from the other side and, specifically, I remember is that the baby is nothing more than a uterus or an ovary. It was just kind of all of the same thing.

And it reminded me back when I was—when we had our first child, our now 28-year old, mother of our grandchild, when she was 12 weeks we had to have a sonogram because we thought there might be some issues. And she was about the size of the end of my thumb. And when we got the 28-year-old technology, she was sucking her thumb. The lady said, oh, look, he or she is sucking her thumb. Now we know it was a her; we didn't know at the time.

It is a distinct individual. Now, I will accede that it 100 percent depends on its mother for life, but it is distinct and separate from its mom. Her heart was beating.

Moving forward, let me just talk about how extreme this bill is. It allows abortion at any time if the unborn child was diagnosed with anything such as Down syndrome. It allows abortion at any time solely based on the baby's biological sex. It allows abortion to occur at any time point, including when a baby can feel pain, as well as when a heartbeat can be detected.

So this is an extreme bill before us today. And before we vote on this, I would like to let my colleagues know that a majority of Americans do not support abortions with no limits. In fact, 80 percent of Americans say abortion should be illegal in the third trimester.

This does not prevent States from making abortions legal in the third trimester.

I strongly urge my colleagues to oppose this bill. It is a separate and distinct life.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from California (Ms. ESHOO), the chairwoman of our Health Subcommittee.

Ms. ESHOO. Madam Speaker, I rise today in strong support of the Women's Health Protection Act.

Nearly 50 years ago, the Supreme Court affirmed the right of every woman to make decisions about her own life, her own body, her own future.

Now that right is under horrible threat by a shameful and unconstitutional law in Texas that bans abortion after 6 weeks of pregnancy, before many women even know they are pregnant. That is a law in defiance of the Federal law. It turns private citizens into snitches to turn women in. That is reminiscent of the Third Reich. And if that sounds staggering, it is because it is.

Every day, women in our country face deeply personal decisions of whether to continue their pregnancies. They should be able to make their own decisions, free from politicians' interference.

The Women's Health Protection Act is exactly that. It protects women. It ensures that every woman has equal access to comprehensive reproductive healthcare. I urge all of my colleagues to support this legislation.

Mrs. RODGERS of Washington. Madam Speaker, I am pleased to yield 2 minutes to the gentlewoman from Indiana (Mrs. WALORSKI).

Mrs. WALORSKI. Madam Speaker, I thank my friend for yielding.

In America, the condition of a child's birth doesn't determine the outcome of their life, for every single person, born or unborn, should have the opportunity to live the American Dream.

But this abortion on demand bill would destroy our country's future. Today, we are embarking on the biggest step backward in our Nation's history. This vote could be the most consequential vote that any of us take.

Today, the science is even more clear than it was in 1973, that a child in the womb is a living person. And yet, my colleagues on the other side remain obsessed with killing unborn babies in the name of female empowerment.

Many supporters of this bill, like me, call us pro-life Americans extreme. I have heard it already this morning.

But I have seen extreme. I have witnessed the cruelty of abortion and it is ugly.

In South Bend, Indiana, Dr. Ulrich Klopfer provided abortions for decades. When he died in 2019, his family found the medically preserved remains of 2,411 children hidden in his garage. That is 2,411 human babies preserved in formaldehyde in jars in his garage. It was national news for a week. This abortionist left a legacy of death and destruction. That is what extreme looks like.

Abortions sold as healthcare is a sickening violation of human dignity that Americans should not and cannot tolerate.

So I will ask this question: Will we allow this to happen again?

As a nation, we have an obligation to future generations to reject abortion on demand and to fight for life. I implore my colleagues here today, join me in opposing this bill and standing for life.



The truth is on our side, and, in the end, the truth is going to prevail.

Mr. PALLONE. Madam Speaker, I yield 30 seconds to the gentlewoman from Connecticut (Ms. DELAURO), the chairwoman of the Appropriations Committee.

Ms. DELAURO. Madam Speaker, let me be clear. Everyone everywhere should have the freedom to make their own personal healthcare decisions without interference from politicians.

When the Supreme Court allowed the most restrictive abortion law in the nation to go into effect in Texas, they made it clear that they cannot be trusted to protect the constitutional right to an abortion. That is why the Congress must act as other States are moving to follow suit.

That is why Democrats are fighting to protect a woman's right to choose. That is why we have removed the restrictive Hyde language from all of our appropriations bills.

It is time to trust women, to respect their decisions. Healthcare is not political, not negotiable.

Mrs. RODGERS of Washington. Madam Speaker, I yield 1 minute to the gentleman from Florida (Mr. BILIRAKIS), ranking member of a subcommittee on Energy and Commerce.

Mr. BILIRAKIS. Madam Speaker, I rise today in strong opposition to the abortion on demand until birth act.

I have worked in Congress to promote a culture of life and remain supportive of measures that respect the sanctity of human life by encouraging alternatives to abortion, including counseling and pregnancy centers for women.

By contrast, the abortion on demand until birth act attempts to override past and future pro-life laws at the Federal and State levels. This will allow abortions based on Down syndrome diagnosis, sex of the baby, and even dismemberment abortions. Simply put, this bill's goal is to promote abortion anywhere, anytime, from conception to birth.

Madam Speaker, our Nation should be investing in women's healthcare and the healthcare of unborn babies. This bill does the opposite. I urge my colleagues to oppose it.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentleman from New York (Mr. JEFFRIES), the chairman of the Democratic Caucus.

Mr. JEFFRIES. Madam Speaker, I thank the distinguished chair for yielding and for his leadership in advancing this incredibly important issue.

America is the land of the free and the home of the brave, but we cannot truly be a free country unless women have the freedom to make their own healthcare decisions. The radical right's effort to take away that freedom, all across country, is unacceptable, unthinkable, untenable, unconscionable, and un-American. We are going to make it unlawful.

We are going to pass the Women's Healthcare Protection Act, and we are

going to protect and respect a woman's freedom to make her own healthcare decisions.

□ 0930

Mrs. RODGERS of Washington. Madam Speaker, I yield 1 minute to the gentlewoman from Missouri (Mrs. HARTZLER), who has fought for life so long.

Mrs. HARTZLER. Madam Speaker, as a woman, as a mom, as a former teacher who worked with hundreds of teenagers and who loves each and every one of them, I rise in opposition to this bill, which isn't about freedom for women; it is about death for babies.

We are faced with multiple questions today.

Is it okay to coerce a woman to have an abortion?

Is it okay to send a 13-year-old girl home to perform a do-it-yourself abortion on herself without medical supervision? Is it okay for her to have this abortion without her parents even knowing?

Is it okay to take the life of a baby just because it has Down syndrome?

Is it okay to take the life of a baby just because it is a girl?

Is it okay? It is not okay. The answer to all of these things should be no.

Yet, this bill eliminates protections for women and girls facing coercion, neglect, and discrimination. It endangers their health, and it ends the life of a living human being with a plan and a purpose from God and who deserves to live.

We are here to defend the basic right to life, and I plead with my colleagues to vote "no."

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from California (Ms. PELOSI), the Speaker of the House of Representatives.

Ms. PELOSI. Madam Speaker, I thank the gentleman for yielding and thank him for his leadership on this very important issue and to all of our colleagues in this pro-choice House Democratic Caucus. This is the first time, Madam Speaker, that we have had a pro-choice Democratic Caucus with a Democratic President, and the timing could not be better because of the assault that has been made on the constitutional rights of women in our country.

Madam Speaker, coming to the floor today, I recall an experience from when I was in high school. Now, that was a long time ago. We were in a debate, a contemporaneous debate situation, and you were to pick something out of a hat and then speak to it.

Well, a person, a friend of mine, drew the question, and it said—now, again, ancient history, a long time ago. It said: "Do women think?" That was the question that she had to speak to: "Do women think?" It seemed horrible at the time. It seems out of the question, beyond horrible now.

Today, years later, it seems that there are some who want to debate

that question because the disrespect for women and their ability to determine the size and timing of their family, and so many other things, is disrespected in the action taken by the State of Texas.

But even worse than that—because what do you expect? Worse than that was the decision of this Court, the Supreme Court of the United States, to embrace the horror of it all, in terms of the legislation and what it did to remove the sanctity of private decision-making from women, but also that it gave an imprimatur to vigilantism, something so outrageous, so unpatriotic, so un-American, madly embraced by this shameful Court, with total disregard for stare decisis, the precedent that the Court had already established, that *Roe v. Wade* was constitutional.

Today, I want to thank JUDY CHU for her leadership, Congress in, Congress out, but now we have the majority and a President and a Democratic Senate. I thank her for her leadership in introducing this again and again.

In advocating the Women's Health Protection Act, we are standing on the side of women to defend their freedoms and to uphold this truth: Every woman everywhere has the constitutional right to basic reproductive healthcare, no matter what State you live in. Constitutional rights are not meted out geographically. They are for the country.

Again, I salute Congresswoman CHU, chair of the Contraception and Family Planning Task Force of the Pro-Choice Caucus, who has been introducing this bill over and over again.

Again, we have produced legislation that can become law. For years, radical restrictions on women's reproductive health freedoms have been pushed across the Nation, with 2021 on track to be the worst legislative year for women's health rights.

I come to this as a Catholic and a mother of five, in 6 years and 1 week, and with the joy that all of that meant to us but with the recognition that it was my husband and I—it was our decision. And we should not, in this body or in that Court, be making decisions for the women in America.

As of July, 90 reproductive health restrictions have been enacted, more than in any year since *Roe v. Wade* was enacted in 1973.

But here is the thing. It is important for the women of America to know that, as this impedes their right to make decisions, the same forces at work don't want in vitro fertilization—actually, even the State of Mississippi rejected that, their prohibition on that—and stand in the way of reproductive health and guidance, in terms of family planning, birth control, and the rest. It is important for American women to know what we are up against when it comes to intrusion into the privacy of a family's life.

You would think that since they are so averse to governance in any way, they wouldn't be so bullish about going

into people's private lives in the way that they do.

What the Supreme Court did was cowardly, a cowardly, dark-of-night decision to allow that bill to go into effect. How could it be? Because it was a decision. The Court made a decision.

But the Republicans in Congress and the then-President made a decision, in a way that was almost shameful, to make sure that so many Justices on the Court—I say shameful because the last one, which they railroaded through, while opposing the review of a Democratic President's suggestion a few years earlier, saying they didn't have enough time, a year. They had enough time, a month.

I just want to say this about Roe. In Roe, the Supreme Court held that personal liberty is protected by the Constitution, which the Court had recognized as extending to decisions relating to marriage, procreation, contraception, family relations, and childrearing, and it is broad enough to encompass a woman's decision whether or not to terminate her pregnancy.

S.B. 8 is an extreme ban on abortion for most women before they even know. Sometimes I wonder if they don't need a lesson in the birds and the bees, but, again, I just want to go to this point. S.B. 8 unleashes one of the most disturbing, unprecedented, far-reaching assaults on healthcare providers and on anyone who helps a woman in any way access an abortion by creating a vigilante bounty system that will have a chilling effect on the provisions of any healthcare services.

What is next? What is next with these vigilantes and their bounty system?

I associate myself with my colleagues' remarks on all of this because they bring so much knowledge of the Constitution, knowledge of the history since 1973 and even studying it before. DIANA DEGETTE, one of the co-chairs of the caucus, fought this issue in the courts and won, fought it in the court of public opinion, and fought it in the Congress of the United States. She, BARBARA LEE, and, of course, JUDY CHU, so many of our women have taken the lead on this.

But, again, although we are about a third of our Caucus—more than a third of our Caucus are women—our male colleagues have been very strong on this as well. Therefore, we will have today a vote for women, a vote for respect for women, a vote for decency, a vote for pride in our Constitution and in our women.

Mrs. RODGERS of Washington. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise today praying that this House will be defenders of truth, humility, and justice.

I rise today in strong opposition to H.R. 3755. The abortion on demand until birth act is extreme. Abortion for any reason, at any stage of pregnancy, until birth, is not the will of the American people.

I spoke with a pediatric cardiologist just this week who shared with me what is possible today. It is just amazing, because of technology, what is possible.

We all know that we can look into the womb and see the development of the baby day by day, week by week. This cardiologist told me that, today, doctors perform prenatal surgeries and treatments to save lives. He said doctors can perform surgeries on 20 different organs. That wasn't possible in 1973 when Roe v. Wade was decided. In fact, the first successful fetal surgery wasn't until 1982, many decades later.

Look how far we have come. Science has evolved. It is my hope that we will learn from this and come to reject abortion because it is inhumane; it is not following the science; and it doesn't reflect the latest research or modern medicine.

Abortion is the sharpest soul-searching question before us as a Nation. This question pierces every heart. People have strongly held beliefs and stories, and both sides are guilty of dismissing one another.

For those of us who stand for life, we must do a better job of listening and loving. Fear and despair are only leading to more arguments, anger, discord, and insecurity.

For me, personally, I have never had an abortion, but I gave thoughts in my younger years as to what I would do if I found myself pregnant and alone. It would have been a desperate situation. I can imagine abortion seeming like an easy solution. It breaks my heart, though, to think that anyone would consider abortion as their only option or the best option.

Growing up, I was not much of a baby person. I was 35 and single when I was elected to Congress, and I didn't even know if being a mom was part of my future. Today, I can testify that bringing a new life into the world is the most amazing thing ever. It is the best part of life.

We have two daughters and a son, Cole, Grace, and Brynn. Cole, now 14, was born with the most common chromosomal abnormality. It is called Down syndrome. When he was born, the doctors gave us a long list of challenges and chances for heartache.

I understand the uncertainty. I understand the fear. But I couldn't imagine my life without Cole. His life is worth living.

Yet, in this debate, Down syndrome has been at the forefront. Just yesterday, a woman named Heidi with Down syndrome lost her court challenge against the British Government over its law allowing abortion up until birth for babies with Down syndrome.

This cannot become America's future, where we cherish life, liberty, and the pursuit of happiness for all.

Like in the U.K., the bill before us is discriminatory. It allows for abortions based on a baby's sex, race, or disability.

It would override counseling requirements that protect women from coer-

cion from people who have abused them. It would prohibit laws designed to protect against sex trafficking and the exploitation of young girls and women. It would weaken protections for medical professionals who have religious objections to abortion.

Despite what the majority says, this bill does not codify Roe v. Wade. This is radical.

□ 0945

Under this bill, viability is whatever the abortionist deems it to be.

I urge all of my colleagues today to stop the abortion on demand until birth act.

Open your minds to science, technology. Look and see the mysteries of the mother's womb. Open your ears to the cries of the unborn.

May hearts break and may we celebrate life. Let's uphold the value, the dignity, and the potential of every life.

Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 30 seconds to the gentleman from New York (Mr. NADLER), the chairman of the Judiciary Committee.

Mr. NADLER. Madam Speaker, I include in the RECORD a letter from The Leadership Conference on Civil and Human Rights and 60 other civil rights organizations in support of the Women's Health Protection Act.

THE LEADERSHIP CONFERENCE  
ON CIVIL AND HUMAN RIGHTS,  
Washington, DC, September 23, 2021.

SUPPORT THE WOMEN'S HEALTH PROTECTION  
ACT OF 2021

DEAR REPRESENTATIVE: The Leadership Conference on Civil and Human Rights, and the 60 undersigned organizations dedicated to protecting and advancing the civil rights, health, and economic security of all persons in the United States write in support of the Women's Health Protection Act of 2021 (H.R. 3755). We urge all members to vote yes on the bill when it reaches the floor.

By protecting abortion access from medically unnecessary restrictions that obstruct the right of all persons to obtain safe, legal abortion services, the Women's Health Protection Act (WHPA) seeks to remedy and prevent the onslaught of state-level abortion bans and restrictions that cause significant and sometimes insurmountable challenges to receiving abortion care. These challenges disproportionately impact the ability of low-income women and women of color to access health care, robs individuals of bodily autonomy, and threatens the economic security of families and individuals, many of whom are already struggling to get by.

This issue is one of grave urgency. Just this month, five Supreme Court justices denied an emergency request to block Texas S.B. 8, a radical six-week abortion ban. Immediate Congressional action is imperative for the future of abortion rights in the United States. We are deeply concerned about the threat of copycat bills appearing in states across the country.

Indeed, abortion rights and access have been steadily under attack. Despite large public support for access to abortion, state lawmakers enacted more than 90 restrictions on abortion this year, including 11 bans—two of which are near-total abortion bans. States have also continued to enact or introduce legislation that restricts access to medication abortion, imposes medically unnecessary restrictions on abortion clinics, or singles out abortion providers for burdensome



restrictions not applied to other healthcare providers. Today, nearly 90 percent of American counties have no abortion provider, forcing people to incur onerous costs to travel long distances for care, or pushing care entirely out of reach.

These laws are not only a threat to the constitutional right to abortion recognized in *Roe v. Wade*, but they are a threat to the economic security, health, and dignity of low-income people, women of color, immigrants, LGBTQ people, and others who—because of a history of structural inequality and discrimination—already have difficulty accessing reproductive healthcare services. Restrictions that force patients to undergo unnecessary tests or procedures, force providers to communicate confusing and medically inaccurate information, or force individuals to make multiple clinic visits drive up individual costs, which can delay abortion access and aggravate economic and health disparities felt by women of color, low-income people, immigrants, LGBTQ people, and other marginalized or multi-marginalized groups.

Restrictive abortion laws that contribute to clinic closures and abortion deserts also increase the cost of obtaining abortion, and Black women are impacted by clinic closures to a greater degree than other groups. Systemic inequality brought on by past and present policies that target and oppress Black people—including the legacy of slavery, mass incarceration, segregation, voter suppression, and exploitative financial practices, such as redlining—have led to concentrated and intergenerational poverty within the Black community. As a result, Black women have diminished access to networks and resources to overcome financial obstacles to accessing care. In the context of clinic closures or abortion deserts, this can mean a de facto ban on abortion. Black women are half as likely to be able to travel 25 to 50 miles for abortion care than White women, who tend to have more financial resources, information, and social networks that allow them to travel.

Restricting access to abortion also threatens to undermine the ability of poorer people and people of color to achieve economic security. People of color and women are disproportionately represented in low-wage jobs, and women of color continue to endure discriminatory wage gaps. Black women, for example, are typically paid just 63 cents for every dollar paid to a White man. American Indian and Native Alaskan women are paid only 60 cents, Latina women are paid only 55 cents, and some Asian American and Pacific Islander women are paid as low as 50 cents for every dollar paid to a White man. Restrictions on accessing abortion, in addition to public funding bans, mean that low-income people and many women of color have to choose between paying their rent, purchasing food, or paying for other basic necessities, and receiving abortion care.

Studies also show that women who are denied abortion care face more economic hardship and risks to their health and safety than women who sought and received abortions. Women denied abortion care are more likely to experience poor health outcomes, including maternal death, as compared to women who received abortions, a trend that is particularly concerning for Black women who are up to four times more likely to experience pregnancy-related death than White women. Women who are denied an abortion and forced to bear a child are also four times more likely to fall into poverty. Conversely, abortion access has been shown to increase women's participation in the workforce, particularly for Black women, and has led to gains in educational attainment.

Every person deserves to have the ability to make the healthcare decisions that are

right for them, and every person must be able to make their own decisions about having children, free from government interference and discrimination. Laws that restrict access to abortion cause the most harm to those who, because of structural racism and existing inequities, already have limited access to resources, are already struggling to achieve economic security, and who already face sometimes life-threatening health disparities. At the most basic level, restrictive abortion laws are aimed at controlling who can exercise their constitutional rights and who can claim agency over their bodies. As such, these laws are an affront to human dignity that perpetuate systems of oppression that prevent the full enjoyment of civil and human rights. The Women's Health Protection Act is an important step in ending these harmful laws and promoting the health, economic security, and well-being of those whom we have forced through law and policy to live at the margins.

Thank you for your consideration of our views.

Sincerely,

The Leadership Conference on Civil and Human Rights; ADL (Anti-Defamation League); American Association of University Women (AAUW); American Atheists; American Federation of Teachers; American Humanist Association; Americans for Democratic Action (ADA); Americans United for Separation of Church and State; Asian American Legal Defense and Education Fund (AALDEF); Autistic Self Advocacy Network; Black Women's Health Imperative; Center for Law and Social Policy (CLASP); Christian Methodist Episcopal Church; Clearinghouse on Women's Issues; Demand Justice; Equal Rights Advocates; Equality California; Feminist Majority Foundation; Fix Our Senate; Freedom From Religion Foundation.

Girls Inc.; Global Project Against Hate and Extremism; Hispanic Federation; Human Rights Campaign; Impact Fund; Indivisible; Jacobs Institute of Women's Health; Jewish Council for Public Affairs; Justice for Migrant Women; Lake Research Partners; Lambda Legal; LatinoJustice PRLDEF; Lawyers' Committee for Civil Rights Under Law; Matthew Shepard Foundation; NAACP Legal Defense and Educational Fund, Inc. (LDF); NARAL Pro-Choice America; National Action Network; National Association of Social Workers; NASW Virginia/Metro DC Chapters; National Center for Transgender Equality.

National Council of Jewish Women; National Health Law Program; National LGBTQ Task Force Action Fund; National Organization for Women; National Partnership for Women & Families; National Urban League; National Women's Law Center; People For the American Way; Planned Parenthood Federation of America; Population Connection Action Fund; Public Citizen; Restaurant Opportunities Centers United; Rise Up America; SEIU; The Workers Circle; Union for Reform Judaism; Voices for Progress; Voto Latino; Women Lawyers On Guard Action Network, Inc.; YWCA Berkeley/Oakland; YWCA USA.

Mr. NADLER. Madam Speaker, in 1970 I watched the New York State Assembly pass one of the first State laws legalizing abortion. If you had told me then that 51 years later, I would be standing on the House floor still fighting for women to have the right to make their own decisions about their own lives, their own health, and their own families, I would have called you crazy.

We must pass this bill today to end this decades-long war on abortion and

women's underlying freedom to control their own lives. I urge all my colleagues to stand up for freedom, stand up for abortion, stand up for bodily integrity and vote "yes" on this bill.

Mrs. RODGERS of Washington. Madam Speaker, I yield 1 minute to the gentleman from Indiana (Mr. BUCSHON), a member of the Energy and Commerce Committee.

Mr. BUCSHON. Madam Speaker, the archbishop of San Francisco said, "This proposed legislation is nothing short of child sacrifice."

The inappropriately named Women's Health Protection Act of 2021 would codify the ability to obtain abortions for any reason at any point in pregnancy. This bill would also preempt and repeal State laws that require informed consent, ultrasounds, or other testing and counseling before undertaking an elective abortion.

As a practicing heart surgeon for 15 years prior to coming to Congress, I operated on children as young as 23 weeks gestation, late second trimester. In fact, the smallest baby I operated on weighed only 650 grams, which is about 1.4 pounds.

I spent my career in medicine caring for patients regardless of their situation, so I take access to healthcare very seriously. I can assure you that my tiny patients were people.

I find it troubling that those on the other side, most of whom have never spent a day taking care of patients, continue to mislead the American people about what constitutes healthcare.

The archbishop also said, "A child is not an object to be thrown away." Vote against this bill.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from Massachusetts (Ms. CLARK), the Assistant Speaker.

Ms. CLARK of Massachusetts. Madam Speaker, it is the Constitution that says women have the right to make their own decisions regarding their bodies. It is the Constitution that gives people the right to make a decision about abortion with their families, their doctor, and in accordance with their faith.

But for over 50 years this right has been under attack. And today we say there is no room in that decision for politicians, there is no room for bounty hunters. This decision resides with people, with women.

Today, we will pass the Women's Health Protection Act, and we will say clearly: This right is now enshrined in law, and we are not going back.

Mrs. RODGERS of Washington. Madam Speaker, I yield 2 minutes to the gentlewoman from North Carolina (Ms. FOXX), a classmate and a champion for life.

Ms. FOXX. Madam Speaker, I rise in strong opposition to H.R. 3755, the so-called Women's Health Protection Act. This should be called the destruction of unborn babies at any stage of development act.

The principles of life, liberty, and the pursuit of happiness are America's

foundation. Without question, life is the fundamental component to both liberty and the pursuit of happiness.

The American people understand the importance of protecting life. An AP Poll shows that 54 percent of Americans believe abortions should be illegal in the third trimester. Another 26 percent believe it should be illegal in most cases in the third trimester. What is more, 65 percent of Americans believe abortion without restriction should be illegal during the second trimester as well.

But this latest Democrat scheme would go against the wishes of the American people and make abortion on demand for any reason legal until the time of birth.

It is clear to see that the so-called Women's Health Protection Act is not about protecting the lives of unborn female babies. It is about handing the anti-unborn baby industry a victory it has sought for many years.

I oppose H.R. 3755, and I urge my colleagues to do the same. We are a country that up until now has valued life, and the majority of Americans still value life, especially the lives of unborn children.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from California (Ms. CHU), the prime sponsor of this legislation.

Ms. CHU. Madam Speaker, I rise today in strong support of my bill, the Women's Health Protection Act.

For decades, *Roe v. Wade* has guaranteed everyone the freedom to access safe abortion care regardless of background. And for decades anti-abortion extremists have been devising new ways to put that right out of reach. That has left many, mainly low-income people of color, to fear that every new anti-choice law could be the one that finally puts abortion access out of reach for them or their daughters.

Well, it is time to put a stop to these attacks once and for all. With today's historic vote, we are ensuring that access to abortion care is a right, from Texas to California.

This bill respects our right and the freedom to make our own choices about our bodies, and it leaves those decisions up to us and our doctors. It is time to take control of our bodies out of the hands of extreme rightwing politicians. It is time to pass the Women's Health Protection Act.

Mrs. RODGERS of Washington. Madam Speaker, I yield 1½ minutes to the gentleman from Michigan (Mr. WALBERG), a colleague from the Energy and Commerce Committee.

Mr. WALBERG. Madam Speaker, I rise in strong opposition to the bill, and with great compassion for the women being lied to by the deceptively named Women's Health Protection Act.

Madam Speaker, let's be clear, this bill is not about healthcare. It is an extreme bill that would impose abortion on demand nationwide up until birth and override commonsense pro-life laws at the State level, laws like those

intended to prevent abortion discrimination based upon a child's sex or based on whether the child has Down syndrome, laws that provide parental notification for minor girls, informed consent for patients, and health and safety protections specific to abortion facilities. All would be banned under this bill.

The bill before us would ban virtually all conscience protections for medical personnel and enable the use of taxpayer money to fund abortion procedures, violating sincerely held beliefs of millions of Americans on the sanctity of human life.

The abortion on demand act ignores the humanity of the baby and the health of the mother. It ignores the reality that life is sacred. It is a precious, God-given gift that must be cherished and protected.

While it is comforting to know that God is loving, He is also just. We destroy innocent life at our own peril. What God condemns, we must not condone. May God heal our land.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from Colorado (Ms. DEGETTE), the chairwoman of our Oversight and Investigations Subcommittee.

Ms. DEGETTE. Madam Speaker, what we are seeing in Texas, Mississippi, and elsewhere is an unprecedented attack on Americans' right to abortion care. It is a systemic effort by politicians who want to roll back the clock on women's healthcare freedom in this country.

To those who continue to rehash the same outdated arguments that would put their own personal beliefs on millions of women, and they say it is somehow good for America, I say, save your breath. It is not.

And for these overheated claims that are being made today on this floor and the rhetoric, I say that is simply not the case.

Madam Speaker, let me suggest a different paradigm that protects the full range of women's healthcare freedom in this country. I will decide what happens to my body, and you decide what happens to yours. I will decide what is best for my health and my life, and you decide what is best for yours.

What is at stake in this fight is not some frivolous benefit. It is the fundamental right of women across the country to decide. Vote "yes" on this important bill.

Mrs. RODGERS of Washington. Madam Speaker, I yield 2 minutes to the gentlewoman from Tennessee (Mrs. HARSHBARGER), a champion for life.

Mrs. HARSHBARGER. Madam Speaker, I rise today to oppose the unconscionable abortion on demand until birth act.

As a mother and a grandmother of two precious grandsons, I am sickened by the attempt to allow abortions on demand until birth.

As a pharmacist, I have seen countless women who struggle with infertility issues. All they ever wanted was

to be able to give birth and to have and to hold those precious children of their own.

Contrast this with what is happening today.

My colleagues across the aisle, many of them are women. They are trying to make it easier to abort for reasons like bad timing or inconvenience. Under this law, every State will be a late-term abortion State, where abortions can be performed until birth for any reason with no accountability or protections for women.

This is heartbreaking to me, and it is heartbreaking to all of the women I have helped overcome fertility issues over the years.

I have talked to many women who have had abortions. Most of them think about that baby they aborted every day. What would their baby look like? What would their baby have grown up to be? Whom would they have married? How many children would they have had? How could that unborn baby have affected our country or our world?

There is such a sorrow that follows these women post-abortion. I want those women who have had abortions to know this: Nothing is wasted, and there is forgiveness from a loving God.

They can make a difference today, even now, by praying. I will continue to advocate on behalf of the right to life. I believe it is a moral and a God-given responsibility that we protect these treasured trusts from Heaven.

I urge my colleagues to join me in voting "no" on this unmerciful and unthinkable bill. The sanctity of human life depends on it.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from Illinois (Ms. SCHAKOWSKY), who chairs our Consumer Protection and Commerce Subcommittee.

Ms. SCHAKOWSKY. Madam Speaker, I rise in strong support of the Women's Health Protection Act that will end the horrifying State-level attacks on abortion access. The Texas law would encourage vigilantism and criminalizes anyone who would even help someone to get an abortion. But Texas is not alone.

Abortion is healthcare. This is a pro-choice country, a pro-choice nation. Women can make the decision to have a child or not have a child. It is about bodily autonomy.

I want to be very clear; *Roe v. Wade* was not the beginning of women having abortions. It was the end of women dying from abortions.

Madam Speaker, I urge my colleagues to vote in favor of this legislation and to say "no" to harming women.

Mrs. RODGERS of Washington. Madam Speaker, I yield 1 minute to the gentleman from Indiana (Mr. PENCE), a champion for life.

Mr. PENCE. Madam Speaker, one word. Heartbreaking. This legislation my Democrat colleagues are trying to enact is just plain old heartbreaking.

History will not look kindly on this abortion on demand legislation.

Let me be clear. This is not about healthcare. This goes far beyond the guise of healthcare. This, in fact, is infanticide. A society is judged by how they treat the most vulnerable among us by God, and God will judge us.

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That is why we must always stand for life, both the born and, of course, today we are talking about the unborn.

As a father of four, a grandfather of eight with one on the way, protecting life will always be my priority, and I urge a "no" vote on H.R. 3755.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentleman from Maryland (Mr. HOYER), our Democratic majority leader.

Mr. HOYER. Madam Speaker, I thank the chairman for yielding.

This is a serious issue. Some would say it is an issue about freedom, about individual integrity, as to who makes choices. I hear a lot about freedom, about government not interfering.

Madam Speaker, millions of women across our country and the men who stand with them are in shock and outrage at the new law in Texas and the Supreme Court's refusal to block it from taking effect. Texas senate bill 8 bans any abortion after 6 weeks. That is, of course, before most women know that they are pregnant.

It includes no exceptions for rape or incest. What do you think the psychological impact on the health of a woman is if you don't think this is about the health of women?

As many as 90 percent of women seeking reproductive care in Texas do so after 6 weeks, meaning that this law effectively bans women in the State from accessing the full range of reproductive care that they are guaranteed under *Roe v. Wade*. Now, my presumption is, of course, most speaking against this are not for and didn't support and would like to see *Roe v. Wade* repealed.

Also deeply disturbing is the way senate bill 8 is enforced. The law gives any private individual the authority to police any of their fellow citizens whom they suspect may be providing for or receiving reproductive care. How draconian, how communistic, how authoritarian such a scheme is.

This vigilante system is at odds with the values of American democracy, reminiscent of the kind of tactics previously used behind the Iron Curtain and still employed by totalitarian regimes.

The bill before us today would enshrine in statute the rights women are guaranteed under *Roe v. Wade* that the majority of Americans support at a time when they are increasingly under attack.

Statistics released in June by the Guttmacher Institute showed that over 500 bills restricting women's healthcare access had already been introduced since the start of this year in State

legislatures; and as of last month, nearly 100 of those had been enacted.

The policies enacted by senate bill 8 and similar measures in other States under Republican control not only have the effect of eliminating access to reproductive choice, but also to a range of lifesaving healthcare services for women, particularly for low-income women.

This will probably not affect many wealthy women who can get in their car or get on the airplane and go wherever they might go. So opposition to this bill is directly discriminatory to women of less means to their healthcare. These range from cancer screenings to prenatal visits; from treating injuries to referring patients to counseling after trauma like sexual assault.

According to the Center for Reproductive Rights, nearly 90 percent of American counties do not have a single reproductive care provider.

For many women, the health clinics that provide these services are their primary source of healthcare. Measures like senate bill 8 are forcing many of these clinics to shut down.

Our country ought to be working to expand these resources for women, not make the healthcare harder to access.

We know that S.B. 8 and similar laws being enacted across the country will not stop women from seeking the full range of reproductive care. You know that. Back to the hanger, perhaps, and the death of scores, thousands, perhaps, of women who see no alternative.

The Women's Health Protection Act is a necessary response to Republicans' efforts to make it harder for women to access healthcare across the country. I thank JUDY CHU for leading this effort. I am grateful to Congresswoman CHU for authoring this legislation and championing this cause.

I am the father of three daughters, the grandfather of two granddaughters, and the great-grandfather of three great-granddaughters. I, frankly, do not want any of us making decisions for their healthcare.

Democrats are committed to taking action to secure *Roe v. Wade* and to protect women's access to reproductive healthcare no matter where they live.

The Women's Health Protection Act is a critical step in securing that ability for millions of American women, and I urge my colleagues to support it.

Mrs. RODGERS of Washington. Madam Speaker, such a sad day. It is beautiful outside, the Sun is shining.

I yield 2 minutes to the gentlewoman from Minnesota (Mrs. FISCHBACH), a champion for life.

Mrs. FISCHBACH. Madam Speaker, I thank my colleague from Washington for yielding me the time.

We hear a lot of talk coming from the other side about this Texas law, but I want to talk about the legislation that we have in front of us today and what effects that will have.

Madam Speaker, it should be called the abortion on demand bill because it

does nothing to protect women's health; rather, it supersedes States' rights and makes any protection for women and unborn children illegal.

This bill will override countless protective State laws like parental notice, clinic regulations, and informed consent before an abortion.

The abortion on demand act would not only strip States of their rights to protect women and babies, but it would also strip away a parent's right to be involved and informed on their child's health and well-being.

What about protecting minors? Would States be allowed to ensure parental involvement or even notification? The answer is, of course, no under this legislation. In fact, it is just the contrary. The bill strips all of these protections provided by State laws.

One of my highest priorities as a Member of Congress is protecting the right to life for all innocent life from conception until natural death. This bill is a shameful attempt to override States' rights and codify widespread abortion on demand in this country.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from New York (Miss RICE).

Miss RICE of New York. Madam Speaker, the extreme abortion ban in Texas makes it clear: We need a Federal law that protects the right to abortion.

The Texas ban is not the first to attempt to eliminate abortion access across this country, and it will not be the last.

Every year the attacks on reproductive health get worse, and we know these attacks are not about the sanctity of life. If they were, Republicans would be wearing masks, they would be promoting the vaccine, and they would be championing our childcare policies that have lifted millions of children out of poverty. We know what the true agenda is: It is about controlling women and taking away their God-given right to make decisions about their own body.

As the Supreme Court prepares to consider a case that will directly challenge *Roe v. Wade*, Congress needs to take action.

Now is the time to pass the Women's Health Protection Act and protect abortion access for every single person across this country.

Mrs. RODGERS of Washington. Madam Speaker, continuing to celebrate life, I yield to the gentleman from New Jersey (Mr. SMITH), the biggest champion of all.

Mr. SMITH of New Jersey. For the first time ever by Congressional statute, this legislation would legally enable the violent death of unborn baby girls and boys by dismemberment, decapitation, forced expulsion from the womb, and deadly poisons for any reason until birth.

This bill will nullify every modest pro-life restriction ever enacted by the States, including women's right-to-know laws in 35 States, parental involvement statutes in 37 States, pain

capable unborn child protection laws in 19 States, waiting period laws in 26 States, and more.

This bill constitutes an existential threat to unborn babies.

Madam Speaker, this bill is far outside the American mainstream and goes far beyond *Roe v. Wade*.

This bill constitutes an existential threat to unborn children and to the value of life itself.

For the first time ever by congressional statute, H.R. 3755 would legally enable the violent death of unborn baby girls and boys by dismemberment, decapitation, forced expulsion from the womb, deadly poisons, or other methods at any time until birth.

A significant majority of Americans are deeply concerned about protecting the lives of unborn children.

A 2021 Marist Poll found that 65 percent of Americans want *Roe v. Wade* reinterpreted to either send the issue to the states or stop legalized abortion.

Of that 65 percent majority of Americans—40 percent of Democrats would “allow certain restrictions on abortions as determined by each state.”

If enacted, this bill will nullify every modest prolife restriction ever enacted by the states including: women's right to know laws in 35 states; parental involvement statutes in 37 states; pain capable unborn child protection laws in 19 states; and waiting period laws in 26 states, and more.

Seventy percent of Americans, according to the 2021 Marist poll, oppose abortion if the child will be born with Down syndrome—with over half of those who identify as pro-choice (56 percent), opposed, or strongly opposed to abortion due to the expectation a child will be born with Down syndrome. Americans seek to “embrace” and not “erase” those babies identified as having an extra chromosome.

H.R. 3755 overturns state laws that protect children with Down syndrome as well.

The U.S. Supreme Court majority in *Roe v. Wade* wrote: “We need not resolve the difficult question of when human life begins.” Sidestepping that threshold question and giving no benefit of the doubt to the child, they went on to legalize and enable abortion on demand.

For decades, abortion advocates have gone to extraordinary lengths to ignore, trivialize, and cover-up the battered baby-victim.

But today, thanks to ultrasound, unborn babies are more visible than ever before.

Modern medicine today treats unborn children with disability or disease as a patient in need of diagnosis and treatment.

Birth is an event—albeit an important one—but not the beginning of life.

Regarding international law, the bill falsely states that “Core human rights treaties ratified by the United States protect access to abortion.”

In fact, the International Covenant on Civil and Political Rights, which the U.S. has ratified, is concerned about unborn children being killed. It states in Article 6 that “Every human being has the inherent right to life” and that “No one shall be arbitrarily deprived of his life.”

It goes on to declare that the “sentence of death . . . shall not be carried out on pregnant women.” The ICCPR creates an exemption from execution for pregnant women, recognizing that their unborn children have an

independent claim to legal protection, as do all unborn children.

The legislation under consideration by the House today is deceptively titled the Women's Health Protection Act of 2021. Abortion is not health care unless one construes the precious life of an unborn child to be analogous to a tumor to be excised or a disease to be vanquished.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from Washington (Ms. SCHRIER).

Ms. SCHRIER. Madam Speaker, Texas' law to pay vigilantes to sue anyone who enables an abortion after 6 weeks is just the latest gross overreach to make it virtually impossible for women to get abortion care.

These laws take away a woman's right to determine if and when to have a child. And I can tell you as a doctor that these laws also undermine a doctor's oath to help her patients and the trust between doctor and patient, not to mention the women's own health.

It is long past time to stop States from putting up absurd roadblocks with no medical justification, like hallway size, arbitrary waiting periods, unnecessary vaginal ultrasounds, government scripted propaganda, and hospital admitting privileges for procedures that don't require a hospital.

This bill blocks States from putting up these barriers to care.

As the only pro-choice woman doctor in Congress, I urge my colleagues to join me in protecting a woman's right to a legal, safe abortion no matter where she lives by supporting the Women's Health Protection Act.

Mrs. RODGERS of Washington. Madam Speaker, as we continue to celebrate life, I yield 1½ minutes to the gentlewoman from Michigan (Mrs. MCCLAIN).

Mrs. MCCLAIN. Madam Speaker, I thank the gentlewoman for yielding and for her diligent effort to save the lives of unborn children. And that is really what this bill is about, saving the lives of unborn children.

For all of us that have children, grandchildren, great-grandchildren, this is about them and their rights. I hear us talking about our rights, but what about their rights? Don't they have a right? Because they have no choice. So thank you for being their voice.

But I rise today to speak the truth. I want to talk about the truth, which doesn't happen much. This act is titled the Women's Health Protection Act, more properly titled the abortion on demand act.

Stop hiding behind Texas. Stop hiding behind women's rights.

The majority has chosen once again to lie to the American people about what this legislation is about. This bill has nothing to do with women's health. This bill is about infanticide. To my Democratic colleagues, if you are in support of infanticide, just say it. You don't need to sugar coat it. Just say it. To my democratic colleagues, if you are in support of killing a child for any

reason, you wanted a boy but it is a girl, oh, we will just get rid of it and try again, just have the courage and the guts to say it.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from Massachusetts (Mrs. TRAHAN).

Mrs. TRAHAN. Madam Speaker, my generation and every generation of women after us has grown up with the freedom and the security under *Roe v. Wade*.

Today those protections are under attack from lawmakers and activists, many of whom have never had to make the tough personal decisions about family planning or about the health of a pregnancy.

Those attacks have been successful, and it is chilling as a mom of two young daughters.

*Roe* is on the verge of elimination, and millions of women are rightly terrified of what that means for their bodily autonomy and the future of reproductive care even beyond abortion.

Today, we are going to pass the Women's Health Protection Act because we know that no one can be more trusted to make the best health decisions for themselves than women.

The government should not have a role in that choice, and I reject the hypocrisy on the other side of the aisle that suggests otherwise.

Please, join us in passing this critical legislation and protecting reproductive rights, protecting the freedom of women to decide. If not for the people you represent, then for the women in your lives.

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Mrs. RODGERS of Washington. Madam Speaker, I yield 1 minute to the gentleman from Arizona (Mr. SCHWEIKERT), a champion for life.

Mr. SCHWEIKERT. Madam Speaker, this is one of those moments I am actually behind the microphone to say thank you. I was born in an unwed mother's home—so was my brother; so was my sister—and you have all met my little girl, as she is here, that came to us as a gift out of nowhere.

But when I was 38 years old, through a series of accidents, I got the phone number from my birth mother, and I called her. The first words were just through the tears and this high-pitched almost—she was struggling; you could hear her almost hyperventilating. “I pray for you every morning. Are you okay? Are you healthy? Are you happy?” I am crying on my side, saying: “I have a great life. Thank you for letting me live.”

Today in the Schweikert family and the Hoyle family, and all of our families together—my little girl is third-generation adopted now. Maybe we are doing something wrong in the family. We would get together with our birth moms and our moms. The amazing thing is my mom became best of friends with my birth mom.

This is the American family of today. Let's love it and respect it.

Mr. PALLONE. Madam Speaker, may I inquire how much time remains.

The SPEAKER pro tempore. The gentleman from New Jersey has 17 minutes remaining.

Mr. PALLONE. Madam Speaker, I yield 1 minute to the gentlewoman from Texas (Mrs. FLETCHER).

Mrs. FLETCHER. Madam Speaker, I rise in support of the Women's Health Protection Act. As an original cosponsor of the bill, I thank Representative CHU for her leadership on this important bill.

As a woman from Texas, I thank this body for responding with urgency to my beloved home State's cruel law, depriving Texans of their constitutional rights, by bringing this bill to the floor today.

In this moment, it is a Texas law, a law quickly being copied across the country, that has brought us here. But let us remember that it was also Texas that brought us the framework for this bill that we will pass today to protect the health, privacy, dignity, and freedom of women and families across this country in the case of *Roe v. Wade*. It was a 26-year-old Texas woman named Sarah Weddington who took that case all the way to the Supreme Court.

Texas women have fought and will continue to fight for the rights that we protect here today. I am proud to be one of them and to vote in favor of this bill.

Madam Speaker, I include in the RECORD a letter from NARAL Pro-Choice America.

STATEMENT OF NARAL PRO-CHOICE AMERICA  
THE WOMEN'S HEALTH PROTECTION ACT (H.R.  
3755)—SEPTEMBER 24, 2021

Thank you for the opportunity to submit a statement to the U.S. House of Representatives on this critical legislation. NARAL Pro-Choice America (NARAL) is a national advocacy organization, dedicated to protecting and advancing reproductive freedom, including access to abortion, contraception, paid leave, and protection from pregnancy discrimination, as a fundamental right and value. Through education, organizing, and influencing public policy, NARAL and our 2.5 million members from every state and congressional district in the country work to guarantee every individual the freedom to make personal decisions about their lives, bodies, and futures, free from political interference. For this reason, we are submitting this statement to thank leadership for holding this vote and to call on Congress to pass the Women's Health Protection Act in order to safeguard the federal right to abortion against bans and medically unnecessary restrictions.

The legal right to abortion faces its greatest threat in decades. Despite overwhelming public support, 8 in 10 Americans, for the legal right to abortion, we're in the midst of an all-out assault on reproductive freedom with *Roe v. Wade* hanging in the balance. The need to enshrine the legal right to abortion in federal statute is more urgent than ever. The fact that the U.S. Supreme Court will soon hear *Dobbs v. Jackson Women's Health Organization*, a direct challenge to *Roe v. Wade*, and that it declined to block Texas's extreme abortion ban, allowing *Roe* to be rendered meaningless in the state, represent ominous signs for the future of abortion rights in this country.

Earlier this month, the Supreme Court failed to intervene and subsequently rejected an emergency request to block Texas Senate Bill 8 (SB 8), a blatantly unconstitutional ban on abortion. This law bans abortion at approximately six weeks before many people even know they are pregnant. It also grants private citizens the power to sue abortion providers and anyone else who helps someone access abortion care; this includes clergy members or counselors, abortion funds that assist someone in paying for abortion care, and even someone who drives a patient to their appointment, like family members, friends, and rideshare drivers. An individual who successfully sues someone for assisting a pregnant person seeking abortion care would receive a financial reward of \$10,000. The Supreme Court's decision to allow SB 8 to go into effect essentially gave Texas the green light to render *Roe v. Wade* meaningless in the state and empowered anti-choice lawmakers to use this law as a blueprint to roll back reproductive freedom in their own states.

The pending Supreme Court case is set against a backdrop of increasingly cruel and draconian restrictions and bans as anti-choice politicians escalate their quest to end legal abortion.

Even as *Roe* stands, though it has long not been a reality for many, the further evisceration of abortion access is ramping up. In addition to Texas's ban, state lawmakers seeking to advance their agenda of power and control have passed hundreds of state-level attacks on abortion access over the last decade that have made care extremely difficult, if not impossible, to access for many people across the country. Systematic attacks on reproductive freedom and abortion access, including bans on abortion coverage, intentionally push access out of reach and have rendered meaningless the protections and rights afforded by *Roe v. Wade* for many people across the country.

The unprecedented threat to the right to abortion underscores the urgent need for Congress to pass the Women's Health Protection Act. Every day without congressional action to protect abortion rights and expand abortion access means that more and more people are denied the right to abortion and ability to access the care that they need—and we know that this disproportionately affects women, Black, Indigenous and People of Color (BIPOC), people working to make ends meet, immigrants, young people, people with disabilities, LGBTQ+ individuals, and those living in rural and other medically underserved areas. Attacks on abortion rights and access are rooted in racism, white supremacy, and other forms of discrimination. Ending these barriers and ensuring equal access to abortion care is central to the pursuit of reproductive freedom and racial and economic justice.

The looming threat to the future of legal abortion across the country is the result of a decades-long far-right strategy to advance a radical and out-of-touch ideological agenda. In the late 1970s, radical conservatives weaponized the formerly non-political, backburner issue of abortion rights as political cover for their efforts to maintain white patriarchal control amidst diminishing support for racist policies like school segregation, which had previously been the backbone of their movement. In the years immediately preceding and following *Roe v. Wade*, Evangelical Christians, who now form the backbone of the GOP, were overwhelmingly indifferent on the issue of abortion. But through the carefully crafted messages of Paul Weyrich, Jerry Falwell, and other architects of the Radical Right, abortion became the political tool of choice for a movement determined to maintain control in a changing

world, and the trojan horse for a far-reaching array of ideologies meant to thwart social progress.

In the intervening years, opposition to abortion has become a litmus test in far-right circles for a host of political and judicial positions. In order to advance their agenda—one that has always stood in direct opposition to the values of the majority of Americans—they developed and implemented a strategy for capturing and maintaining minority rule. This strategy included pushing regressive boilerplate legislation chipping away at access to abortion through state legislatures and Congress, as well as stacking the federal judiciary with anti-choice ideologues.

Anti-choice activists have spent decades building their influence over the federal judiciary through well-funded, secretive networks like the Federalist Society. Conservative activists have never been shy about the fact that their takeover of the federal judiciary is part of a broad strategy to quell the majority and cement minority rule, but the election of Donald Trump took this tactic to new heights. In May 2016, Trump pledged to only nominate anti-choice judges, a promise he doubled down on in 2020. And with the help of Mitch McConnell, Trump installed anti-choice federal judges with lifetime appointments at a breakneck pace. More than a quarter of currently active federal judges are now Trump appointees, including Supreme Court justices Neil Gorsuch, Brett Kavanaugh, and Amy Coney Barrett—tipping the balance of the Court to a supermajority unmistakably hostile to reproductive freedom. We have already seen this majority use the so-called “shadow docket” to undermine the right to abortion and abortion access. There is no denying that the threat to *Roe v. Wade* is real.

Anti-choice lawmakers, emboldened by the anti-choice supermajority on the Court, have accelerated their push to pass blatantly unconstitutional bans and restrictions on abortion—introducing, advancing, or passing over 330 bills attacking abortion access this year alone, some going as far as criminalizing pregnant people and doctors who provide abortion care. Now, more than ever, the anti-choice movement is advancing its extremist agenda in plain sight. Already this year, at least eight states have enacted laws that criminalize doctors for providing abortion care. When abortion care is criminalized, lives are on the line. Ending legal abortion would roll back the clock for our rights, but it would not eliminate abortion. It would only isolate and endanger people trying to make the best decisions for their lives and their futures.

The interrogation and punishment of people who are pregnant is not far-fetched—it is already happening. People across the country are already being charged or prosecuted for pregnancy outcomes including pregnancy loss, self-managing abortion care, or even the suspicion of it. Criminalizing people for having an abortion, experiencing a miscarriage or stillbirth, or any other pregnancy outcome only exacerbates racial inequities and is just one of the many ways that Black, Indigenous, and other people of color have been criminalized.

NARAL Pro-Choice America strongly supports the Women's Health Protection Act, which was re-introduced this year by Representatives Judy Chu (D-CA), Lois Frankel (D-FL), Ayanna Pressley (D-MA), and Veronica Escobar (D-TX), and Senators Richard Blumenthal (D-CT) and Tammy Baldwin (D-WI). *Roe v. Wade* and access to abortion care are on the line like never before and this moment requires urgent action from Congress. All people—no matter who they are or where they live—should have the

freedom to make their own decisions about whether to start or grow a family, free from political interference. Enacting the Women's Health Protection Act is a critical step toward creating a world where every body is free to make the best decisions for themselves, their families, and their lives.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 30 seconds to the gentlewoman from New York (Mrs. CAROLYN B. MALONEY), chair of the House Committee on Oversight and Reform.

Mrs. CAROLYN B. MALONEY of New York. Madam Speaker, our constitutional rights are under attack. We must pass the Women's Health Protection Act to firmly establish a statutory right to abortion care in every community across our country.

Our rights are no longer being chipped away. They are being bulldozed into the ground. We must act now before it is too late.

Madam Speaker, I thank our chairman for his extraordinary leadership on this issue, and I urge a "yes" vote.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 30 seconds to the gentleman from Texas (Mr. DOGGETT).

Mr. DOGGETT. Madam Speaker, "Let Freedom Ring" has been replaced by Texas Republicans with "Let vigilantes hunt."

Neighbors spying on neighbor. Offering \$10,000 bounties on a driver, a physician, anyone who offered counsel. So invasive that an Arkansas convict has now sued a San Antonio physician. Mandatory motherhood, even in cases of rape and incest, with Republicans targeting only those survivors who are seeking healthcare.

Protect the fundamental right of choice. Reject this narrow-minded, unconstitutional, Republican power-hungry, vigilante injustice. Join us next Saturday at the Women's March for Freedom at the State Capitol in Austin.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 30 seconds to the gentlewoman from California (Ms. LEE).

Ms. LEE of California. Madam Speaker, I rise in strong support of H.R. 3755. As co-chair of the Pro-Choice Caucus, I am a proud original cosponsor. I thank my good friend and Congresswoman, JUDY CHU, for her persistent leadership, also Chairman PALLONE and the Speaker for bringing it to the floor.

Madam Speaker, make no mistake, people deserve the freedom to control their own bodies, lives, and futures. We must protect the right to access abortion and to ensure that it is available and affordable.

Now, I remember the days of back alley, unsafe abortions. We cannot, and we will not, go back to those days.

Passing this bill would provide a critical safeguard against attacks on reproductive freedom and ensure that abortions are accessible and available for all, which means also low-income women and people of color. This is our body. It is our choice.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 30 seconds to the gentlewoman from Florida (Ms. WASSERMAN SCHULTZ).

Ms. WASSERMAN SCHULTZ. Madam Speaker, it is past time we took the power to make deeply personal healthcare decisions out of Governors' mansions and State legislatures and put them back where they belong, in the hands of patients and their doctors.

Just this week, my home State of Florida filed a horrific anti-abortion bill that is a revolting assault on women's rights. With Federal courts becoming more hostile to reproductive access, we must not waver in the passage of the Women's Health Protection Act.

Thankfully, this bill before us today protects the right to access abortion throughout the United States and safeguards against medically unnecessary bans and restrictions like those in Texas' S.B. 8.

Equal access to abortion care everywhere is essential to economic participation, reproductive autonomy, and the right to determine our own lives.

Congress has a responsibility to pass legislation that makes these human rights a reality.

Madam Speaker, I urge passage of this vital piece of legislation.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 30 seconds to the gentlewoman from California (Ms. SPEIER).

Ms. SPEIER. Madam Speaker, I thank the chairman, and I thank JUDY CHU for their leadership.

Madam Speaker, 10 years ago on this floor, I spoke about a second-term abortion that I had. It was painful. It was hard. But I did because so many on the other side of the aisle that day knew nothing about what women endure. We are not vessels for a man to inject their sperm into and then walk away with no consequences.

This is my body, not yours. Many on the other side of the aisle whine about the freedom that they have lost by having to wear masks, yet you want to take my freedom to control my body away from me.

You have not carried a fetus in your body. You have not had a fetus die in your body. You have not had to mourn the loss. You stand there preaching birth but not life.

This is my body. This is my life. This is my freedom.

Mrs. RODGERS of Washington. Madam Speaker, standing for life, standing as someone who has carried a

baby and lost a baby, standing and continuing to celebrate life, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 30 seconds to the gentleman from Rhode Island (Mr. CICILLINE).

Mr. CICILLINE. Madam Speaker, I rise today in strong support of the Women's Health Protection Act.

If we truly value women, we must protect their right to control their own bodies and their freedom to make their own healthcare decisions.

This includes the right to safe abortion, guaranteed by the Supreme Court in *Roe v. Wade* almost 50 years ago—not more, nothing less.

But this right is under fierce attack. We have seen wildly restrictive abortion bans, a \$10,000 bounty on people who help women who are seeking abortion care. This is unconstitutional and dangerous.

This bill will guarantee women all across this country the freedom to make their own healthcare decisions, a basic and well-established constitutional right.

Madam Speaker, I urge my colleagues to support it.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield 30 seconds to the gentlewoman from Washington (Ms. DELBENE).

Ms. DELBENE. Madam Speaker, I rise today in support of the Women's Health Protection Act, a historic vote which will cement the right to abortion in the United States.

The impending cases before the Supreme Court are proof that the assault on women and *Roe* are real, and Congress must step up. Women have a right to full reproductive healthcare, including abortion. Lawmakers have a responsibility to uphold this right.

Madam Speaker, I urge my colleagues to vote "yes" on the Women's Health Protection Act.

The SPEAKER pro tempore (Ms. SPEIER). The gentlewoman from Colorado (Ms. DEGETTE) controls the balance of the time.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Ms. DEGETTE. Madam Speaker, I yield 30 seconds to the gentlewoman from North Carolina (Ms. ADAMS).

Ms. ADAMS. Madam Speaker, a woman who does not own or control her own body cannot call herself free.

I want you to close your eyes and imagine being forced to give birth during a global pandemic: fewer in-person visits, more telehealth visits; new parents having children alone without their families, worrying if the baby will catch the virus; something goes wrong, there may not be space in the ICU.

Now open your eyes to the truth. A woman should not have to yield control over her own choices and her own body.

So let's pass this bill, the Women's Health Protection Act. That is what we need to do.



Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Ms. DEGETTE. Madam Speaker, may I inquire as to the time remaining on both sides.

The SPEAKER pro tempore. The gentlewoman from Colorado has 12 minutes remaining. The gentlewoman from Washington has 7 minutes remaining.

Ms. DEGETTE. Madam Speaker, I yield 30 seconds to the gentleman from Florida (Mr. CRIST).

Mr. CRIST. Madam Speaker, I thank the chairman and the gentlewoman from California for her leadership.

Access to safe and legal abortion is about trust—trust in those seeking reproductive care, trust that they will know what is best for their bodies and their families, and trust in them to make a choice that only they can make about their own future.

What we are seeing in Texas and in the Supreme Court is what happens when government wants to make the choice for you, and I am hearing from Floridians who are terrified that the Governor of Florida wants to bring Texas-style tyranny to the Sunshine State.

Not on our watch. Vote “yes” on the Women’s Health Protection Act.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Ms. DEGETTE. Madam Speaker, I yield 30 seconds to the gentlewoman from Washington State (Ms. JAYAPAL).

Ms. JAYAPAL. Madam Speaker, one in four women across America has had an abortion. I am one of them.

It is a deeply personal choice about control of our own bodies and the consequences of a choice that only we will have to live with. Do not criminalize me and millions of women like me around the country. Do not criminalize those that help us.

Let me be clear. The cruel Texas abortion law and decades of efforts to repeal Roe v. Wade are nothing but attempts to control our bodies and our choices.

Madam Speaker, terminating my pregnancy was not an easy choice for me, but it was my choice. It is time to preserve that for all people.

Mrs. RODGERS of Washington. Madam Speaker, continuing to stand, celebrating life, I reserve the balance of my time.

□ 1030

Ms. DEGETTE. Madam Speaker, I yield 30 seconds to the gentlewoman from Texas (Ms. GARCIA).

Ms. GARCIA of Texas. Madam Speaker, Congress must protect women’s constitutional freedom to decide over their bodies. After the cruel Texas—my home State—abortion ban, I visited the local Planned Parenthood and heard horrific stories of women already resorting to self-help, including finding an abortion tea on the internet.

We cannot go back to the dark ages of using dangerous wire hangers for

self-help and other things that will actually hurt and potentially kill women. We cannot continue to go back. We must move forward and protect our rights.

Madam Speaker, I urge passage of the Women’s Health Protection Act.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Ms. DEGETTE. Madam Speaker, I yield 30 seconds to the gentlewoman from Georgia (Mrs. MCBATH).

Mrs. MCBATH. Madam Speaker, generations of women fought for the right to vote, they fought for a seat in the university classroom, a seat in the boardroom, and a seat in our government. And they fought for the freedom for us to make our own decisions about our bodies.

Generations of women secured these gains so that we could build on their efforts toward a just and equitable society. We cannot allow their work to be undone. That is why I am proud to vote in favor of the Women’s Health Protection Act.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Ms. DEGETTE. Madam Speaker, I yield 30 seconds to the gentleman from Texas (Mr. GREEN).

Mr. GREEN of Texas. Madam Speaker, the Constitution recognizes that there are limits that can be placed on the long arm of the law. The long arm of the law has limitations when it comes to speech. The long arm of the law has limitations when it comes to religion. And the long arm of the law has limitations in terms of how far it can extend into a women’s womb.

This bill checks the long arm of the law so that it does not extend too far into a women’s womb.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Ms. DEGETTE. Madam Speaker, I yield 30 seconds to the gentleman from New Hampshire (Mr. PAPPAS).

Mr. PAPPAS. Madam Speaker, for 48 years the right to choose has been the law of the land, and it is time that Congress protects that right and access to the full range of reproductive care.

States are passing dangerous bans on abortion that harm patients and criminalize doctors, and anti-choice legislators are erecting barriers that are ever more onerous for women. This has even happened in my home State of New Hampshire where the legislature passed an abortion ban and forced ultrasounds for women seeking an abortion.

If the Supreme Court won’t protect Roe v. Wade, then Congress must pass the Women’s Health Protection Act.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Ms. DEGETTE. Madam Speaker, I yield 1 minute to the gentlewoman from Massachusetts (Ms. PRESSLEY), an original cosponsor of this legislation.

Ms. PRESSLEY. Madam Speaker, abortion care is a fundamental human

right. Texas’ unconscionable abortion ban is further evidence that lawmakers who aim to do harm will stop at nothing to attack our reproductive rights and bodily autonomy. But not on our watch.

It is clear the Supreme Court is no longer on the side of justice and the pro-choice majority of the House of Representatives has a responsibility to stand in the gap and to act.

Today, we must, and we will, pass the Women’s Health Protection Act. I am proud to co-lead this bill with Congresswoman CHU to codify the right to abortion care.

Madam Speaker, I urge my colleagues to stand with us to reaffirm reproductive justice and protect this fundamental right.

Mrs. RODGERS of Washington. Madam Speaker,

Open up, O heavens, and pour out your righteousness. Let the Earth open wide so salvation and righteousness can sprout up together.

I, the Lord, created them.

What sorrow awaits those who argue with their creator.

Does a clay pot argue with its maker?

Does the clay dispute with the one who shapes it, saying, Stop, you’re doing it wrong?

Does the pot exclaim, How clumsy can you be?

How terrible it would be if the newborn baby said to its father, Why was I born?

Or if it said to its mother, Why did you make me this way?

It is the word of the Lord.

Madam Speaker, I reserve the balance of my time.

Ms. DEGETTE. Madam Speaker, I yield 30 seconds to the gentlewoman from New Jersey (Ms. SHERRILL).

Ms. SHERRILL. Madam Speaker, I rise in support of the Women’s Health Protection Act.

For almost my entire life, Roe v. Wade has been the law of the land. And after continuous attacks on Roe for the past five decades, I, for the first time fear that it is truly imperiled.

The attacks on women’s health in Texas and the court’s refusal thus far to protect our Constitution and women lays out a roadmap really for States across the Nation. That is why this legislation is critical, so Congress can stand in the breach and protect women and our constitutional rights across the Nation.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Ms. DEGETTE. Madam Speaker, I yield 30 seconds to the gentleman from New York (Mr. JONES).

Mr. JONES. Madam Speaker, a few weeks ago, the far right, a 6–3 majority on the Supreme Court, quietly overturned Roe v. Wade.

Today, we pass the Women’s Health Protection Act to restore reproductive freedom nationwide and protect fundamental rights that the Supreme Court will not.

These justices will do whatever they can to erase reproductive rights. So we

must also restore balance to the Supreme Court by adding seats. The American people agree. Not just 90 percent of Democrats, but 61 percent of Independents.

Until we end the domination of the far-right majority, reproductive freedom will never be secure.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Ms. DEGETTE. Madam Speaker, I yield 30 seconds to the gentlewoman from New Mexico (Ms. LEGER FERNANDEZ).

Ms. LEGER FERNANDEZ. Madam Speaker, New Mexico is a border state with Texas. Because of the extreme abortion ban, our Texas hermanas are driving hours to receive abortion care in New Mexico.

We are receiving women's rights refugees with open arms, hearts, and open clinics. To deputize complete strangers to interfere with a woman's health choice is constitutionally, medically, and morally wrong.

Many minority, LGBTQ, and low-income women can't afford to travel and access quality healthcare. Let's pass the Women's Health Protection Act so that we can protect women's freedom in every State.

Mrs. RODGERS of Washington. Madam Speaker, I yield 1 minute to the gentlewoman from Florida (Mrs. CAMMACK).

Mrs. CAMMACK. Madam Speaker, I stand before you today, the daughter of a single mother. I was the first in my family to go to college, an individual who just 10 years ago was homeless, and now today a Member of Congress.

A Member of Congress. People like me are not supposed to be here. We just don't make it to quite this level, typically. And, quite frankly, I am not supposed to be here breathing. You see, my mom when she was 27 years old suffered a stroke when she was pregnant with my sister. The doctors told her then that she would never be able to have children again.

So you can imagine, years later when she found herself pregnant with me, she was scared and alone, and being told by her doctors that she would not only die, that the child would die, too, and that she must abort. But my mom did something incredibly brave that day, she made a choice against the advice of her doctors, against the pressure of her own family, and she chose life.

You know, my colleagues on the other side of the aisle, Madam Speaker, have been talking about how our constitutional rights are under attack, and I agree, they are. Because they begin with life, liberty, and the pursuit of happiness. It starts with life.

Madam Speaker, I am proud to stand and fight for our unalienable rights and the rights of those little girls yet to be born.

Ms. DEGETTE. Madam Speaker, I yield 30 seconds to the gentlewoman from North Carolina (Ms. MANNING).

Ms. MANNING. Madam Speaker, I rise in strong support of the Women's Health Protection Act. Congress must take action against the Republican's relentless attacks on women's reproductive freedom, including medically unnecessary restrictions and blatantly unconstitutional bans on abortions. These State bans go against 50 years of judicial precedent.

We must take action now to protect women and their freedom to make decisions about their own bodies, their own health, their own families.

Madam Speaker, I urge my colleagues to support this vital bill.

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Ms. DEGETTE. Madam Speaker, I yield 30 seconds to the gentlewoman from Georgia (Ms. WILLIAMS).

Ms. WILLIAMS of Georgia. Madam Speaker, I rise today in support of reproductive freedom; for the people I met while working for Planned Parenthood who had to travel across State lines just to get the care that they need.

The relentless assault on abortion in State legislatures and courtrooms has nothing to do with health or care. It is about scoring political points on the backs of those most marginalized.

It might be Texas first, then Mississippi, then my home State of Georgia where, as we speak, another despicable abortion ban is having its day in Federal court right now.

We can't leave the right to safe and legal abortion to the whim of States. Congress must ensure that everyone, no matter their ZIP Code, can make decisions about their health and families freely.

Madam Speaker, I urge my colleagues to join me in supporting the Women's Health Protection Act.

Mrs. RODGERS of Washington. Madam Speaker, I yield 1 minute to the gentleman from Nebraska (Mr. FORTENBERRY), my classmate and champion for life.

Mr. FORTENBERRY. Madam Speaker, the Women's Health Protection Act has a powerfully good name, but the name masks its intention.

This bill would make America the most pro-abortion Nation on Earth. It in no way advances the principles of inclusion and equity routinely championed on this floor. It does just the opposite: it hurts the most vulnerable in our society, expectant mothers and their preborn children.

So, my colleagues, my friends, I urge us, let's please turn from the contradictions here and maybe, just maybe, open our hearts to another way. When there is news of an unexpected pregnancy and that vulnerable moment of uncertainty, suppose that we as a community of care committed to the journey of life to help a mother and her child, before birth, at birth, and after birth. That is called commitment. That is called compassion. That is called love. That is called care for her.

Ms. DEGETTE. Madam Speaker, I yield 30 seconds to the gentlewoman from Texas (Ms. JACKSON LEE).

Ms. JACKSON LEE. Madam Speaker, S.B. 8 will kill women. It is a dangerous, dangerous depriving of our constitutional rights, but it will kill women. It is a bill that provides a provision that I have never seen in my lifetime living in the United States of America, a free Nation.

It actually sets a bounty, reminiscent of eras of dastardly life in this country, the slave life; a bounty in order to stalk a woman to ensure that the provider does not give and the woman does not get an abortion.

I support this legislation because it upholds the Constitution, and I look forward to my bill on preventing vigilante stalking being passed.

Madam Speaker, as a senior member of the Judiciary Committee and the Chair of the Subcommittee on Crime, Terrorism, and Homeland Security; a member of the Democratic Working Women's Task Force, the representative of 700,000 highly interested and affected persons in the Eighteenth Congressional District of Texas; as a sponsor of the legislation; and as a woman who was born and came of age during a period when the women of America were denied rights that men took for granted, including the basic human right of autonomy over one's own body and to decide for herself the profound and fundamental question of whether to bear or beget a child, I rise in strong support of H.R. 3755, the Women's Health Protection Act, which protects a person's ability to determine whether to continue or end a pregnancy, and to protect a health care provider's ability to provide abortion services.

I am extremely pleased that the Biden-Harris Administration strongly endorses this legislation and urges its swift passage by the Congress.

Madam Speaker, I support H.R. 3755 because it states clearly and unequivocally in Section 4 that a "health care provider has a statutory right under this Act to provide abortion services, and may provide abortion services, and that provider's patient has a corresponding right to receive such services, without any burdensome limitations or requirements."

Burdensome and unlawful requirements include:

1. A requirement that a health care provider perform specific tests or medical procedures in connection with the provision of abortion services, unless generally required for the provision of medically comparable procedures.

2. A requirement that the same health care provider who provides abortion services also perform specified tests, services, or procedures prior to or subsequent to the abortion.

3. A requirement that a health care provider offer or provide the patient seeking abortion services medically inaccurate information in advance of or during abortion services.

4. A limitation on a health care provider's ability to prescribe or dispense drugs based on current evidence-based regimens or the provider's good-faith medical judgment, other than a limitation generally applicable to the medical profession.

5. A limitation on a health care provider's ability to provide abortion services via telemedicine.

6. A requirement or limitation concerning the physical plant, equipment, staffing, or hospital transfer arrangements of facilities where abortion services are provided, or the credentials or hospital privileges or status of personnel at such facilities, that is not imposed on facilities or the personnel of facilities where medically comparable procedures are performed.

7. A requirement that, prior to obtaining an abortion, a patient make one or more medically unnecessary in-person visits to the provider of abortion services or to any individual or entity that does not provide abortion services.

8. A prohibition on abortion at any point or points in time prior to fetal viability, including a prohibition or restriction on a particular abortion procedure.

9. A prohibition on abortion after fetal viability when, in the good-faith medical judgment of the treating health care provider, continuation of the pregnancy would pose a risk to the pregnant patient's life or health.

10. A limitation on a health care provider's ability to provide immediate abortion services when that health care provider believes, based on the good-faith medical judgment of the provider, that delay would pose a risk to the patient's health.

It is important to note that prior to fetal viability, the law prohibits a health care provider requiring a patient seeking abortion services to disclose the patient's reason or reasons for seeking abortion services, or a limiting the provision or obtaining of abortion services at any point or points in time prior to fetal viability based on any actual, perceived, or potential reason or reasons the health care provider believes the patient has for obtaining abortion services.

Madam Speaker, H.R. 3755 contains another important provision, this one directed toward the judiciary, and it is that all courts are to "liberally construe" the provisions of the law to effectuate the congressional intent in enacting the law and that courts are not to construe the act in anyway "to authorize any government to interfere with a person's ability to terminate a pregnancy, or to diminish or in any way negatively affect a person's constitutional right to terminate a pregnancy."

To enforce the provisions of the legislation, the Attorney General is authorized to commence a civil action for prospective injunctive relief on behalf of the United States against any government official that is charged with implementing or enforcing any limitation or requirement that is challenged as a violation of a statutory right under this Act.

In addition, H.R. 3755 authorizes private rights of action to be brought for injunctive relief against the government official that is charged with implementing or enforcing the challenged limitation or requirement by any individual or entity, including any health care provider, aggrieved by the alleged violation of this Act.

Madam Speaker, swift, clear, and decisive action to codify the rights and protections provided by the U.S. Supreme Court's landmark decision in *Roe v. Wade*, 410 U.S. 113 (1973) is the clearly required response to the more than 500 state laws restricting abortion access over the past decade.

These regressive restrictions have eliminated access to abortion care in large swaths of the United States; nearly 90 percent of U.S. counties are without a single abortion provider and five states are down to their last clinic.

The people hurt most by abortion restrictions are those who already face barriers to accessing health care—including Black, indigenous and persons of color, women, those working to make ends meet, members of the LGBTQI+ community, immigrants, young people, those living in rural communities, and people with disabilities.

Madam Speaker, right-wing Republican legislators passed, and the Republican governor signed, Texas SB8, an extreme and facially unconstitutional law that contemptuously violates existing Supreme Court precedent.

The Texas law significantly impairs women's access to critical reproductive health care, particularly affecting communities of color, individuals with low incomes, and those who live in rural or underserved communities.

The law also turns private citizens into bounty hunters who are empowered to bring lawsuits against anyone who they believe has helped another person get an abortion, including family members, faith leaders, Uber drivers and others providing transportation, and health care providers.

The new Texas law prohibits abortions as early as six weeks into a pregnancy and creates the opportunity for almost any private citizen to sue abortion providers and women seeking to terminate their pregnancy past six weeks.

The law effectively bans abortion in Texas, as the six-week cutoff is just two weeks after a missed menstrual cycle.

The "hotline" reporting system in the Texas law is particularly malicious.

Since enforcement of the bill lies entirely with private citizens, Texans are incentivized to stalk women as they make vitally important decisions about their own health.

It is anathema to the conscience of the United States of America to have individuals following women to determine whether they have or will receive an abortion.

We saw similar occurrences during the KGB era of the Soviet Union, as neighbor spied on, lied against, and turned against neighbor to hand over their fellow citizens to the state.

We are Americans, and to have a law that so blatantly foments distrust and stalking among our citizenry is a blatant spit in the face of the principles on which this country was founded.

To assist in stopping this law, and to protect women from vigilante bounty hunters, I have introduced H.R. 5226, the "Preventing Vigilante Stalking that Stops Women's Access to Healthcare and Abortion Rights Act of 2021."

This bill would enhance criminal penalties under the federal stalking statute if the stalking is done with the intent to prevent or report on a woman's health decisions.

Importantly, this bill does not include any mandatory minimums.

This bill will weaken the incentive to stalk women by bolstering the criminal penalties under the federal stalking statute if the stalking is intended to prevent or report on a woman's health decisions.

Additionally, earlier this year, the U.S. Supreme Court announced that in December it will hear argument on a Mississippi law banning abortion after 15 weeks of pregnancy, which represents a direct challenge to the continued vitality of *Roe v. Wade*.

Madam Speaker, one of the most detestable aspects of these continued attacks to undermine a woman's right to reproductive health

care is that it would curb access to care for women in the most desperate of circumstances.

Women like Danielle Deaver, who was 22 weeks pregnant when her water broke and tests showed that Danielle had suffered anhydramnios, a premature rupture of the membranes before the fetus has achieved viability.

This condition meant that the fetus likely would be born with a shortening of muscle tissue that results in the inability to move limbs.

In addition, Danielle's fetus likely would suffer deformities to the face and head, and the lungs were unlikely to develop beyond the 22-week point.

There was less than a 10% chance that, if born, Danielle's baby would be able to breathe on its own and only a 2% chance the baby would be able to eat on its own.

Abriding a woman's right to reproductive health care hurts women like Vikki Stella, a diabetic, who discovered months into her pregnancy that the fetus she was carrying suffered from several major anomalies and had no chance of survival and whose physician determined that because of Vikki's diabetes, induced labor and Caesarian section were both riskier procedures for Vikki than an abortion.

SB8 is the most brazen, but not the first, attempt to roll back women's reproductive health care rights in Texas.

In 2013 Texas passed a law that would have cut off access to 75 percent of reproductive healthcare clinics in the state had it not been challenged before the U.S. Supreme Court in 2014 and 2015.

On October 2, 2014, the Supreme Court struck down as unconstitutional a Texas law that required that all reproductive healthcare clinics that provided the full range of services would be required to have a hospital-style surgery center building and staffing requirements.

This requirement meant that only 7 clinics in the entire state would be allowed to continue to provide a full spectrum of reproductive healthcare to women.

But because Texas is a vast state comprising 268,580 square miles, (second only in size and population to the state of California), implementation of the law would have ended access to reproductive services for millions of women in my state.

In 2015, the State of Texas once again threatened women's access to reproductive health care when it attempted to shutter all but 10 healthcare providers in the state of Texas.

The Supreme Court once again intervened on behalf of Texas women to block the move to close clinics.

Madam Speaker, since the United States Supreme Court ruled over 40 years ago, in *Roe v. Wade* (410 U.S. 113 (1973)), that a woman's constitutional right to privacy includes her right to abortion, both abortion rates and risks have substantially declined, as have the number of teen and unwanted pregnancies.

If opponents were so concerned about women's health and safety, they would be promoting any one of the number of evidence-based proactive policies that improve women's health and well-being.

Instead, they are continuing their assault on women's constitutional rights and their campaign to outlaw abortion.

That is their number one priority; it is certainly not about protecting women's health; it is about politics.

It is clear women are under attack and must be on perpetual guard against new attacks on women's access to reproductive health care, often couched in those same terms.

Madam Speaker, this is not what the American people want.

Support for abortion access is at an all-time high; nearly 80 percent of Americans do not want to see *Roe v. Wade* overturned.

There is no state in the Nation where making abortion illegal is popular.

The American people want more access to health care, not less, and it is more critical than ever to see through this inflammatory misinformation campaign.

Madam Speaker, the right to make decisions about reproductive health care, including abortion, is central to individual equality.

The right enables a person to decide if, when, and how to start and grow their family.

It enables people to pursue and advance in their education and employment, and to be full and equal participants in society.

Laws that restrict reproductive freedom, including restrictions on abortion and birth control, perpetuate harmful stereotypes about gender roles and undermine gender equality.

Courts, federal law, and the public have long connected reproductive freedom with equality.

Reproductive freedom is central to women's equality, for as the Supreme Court said in *Planned Parenthood v. Casey*, 505 U.S. 833 (1992): "The ability of women to participate equally in the economic and social life of the Nation has been facilitated by their ability to control their reproductive lives."

Americans understand this connection and it is reflected in a January 2019 national poll showing 71% of voters agree—48% agree strongly—that equal rights for women includes access to reproductive health care.

State laws like Texas SB8 represent unconstitutional infringements on the right to privacy, as interpreted by the Supreme Court in a long line of cases going back to *Griswold v. Connecticut*, 381 U.S. 479 (1965) and, of course, *Roe v. Wade*.

In *Roe v. Wade*, the Court held that a state could not prohibit a woman from exercising her right to terminate a pregnancy in order to protect her health prior to viability.

While many factors go into determining fetal viability, the consensus of the medical community is that viability is acknowledged as not occurring prior to 24 weeks gestation.

Supreme Court precedents make it clear that neither Congress nor a state legislature can declare any one element—"be it weeks of gestation or fetal weight or any other single factor—as the determinant" of viability. *Colautti v. Franklin*, 439 U.S. 379, 388–89 (1979).

The constitutionally protected right to privacy encompasses the right of women to choose to terminate a pregnancy before viability, and even later, where continuing the pregnancy to term poses a threat to a woman's life, health, or safety.

This right of privacy was hard won and must be preserved inviolate.

Madam Speaker, every pregnancy is different, and no politician knows, or has the right to assume he knows, what is best for a woman and her family.

These are decisions that properly must be left to women to make, in consultation with their partners, doctors, and their God.

I urge all Members to join me in voting to protect a person's ability to determine whether to continue or end a pregnancy, and to protect a health care provider's ability to provide abortion services by voting for H.R. 3755, the Women's Health Protection Act.

[From the *Intelligencer*, Sept. 3, 2021]

TEXAS IS ALREADY CREATING ABORTION REFUGEES

(By Melissa Jeltsen)

Just pause and breathe. We're going to help, but I need you to take a breath and calm down for a moment.

Kathaleen Pittman, director of the Hope Medical Clinic for Women in Shreveport, Louisiana, repeated this mantra over and over to the teary women on the other end of the phone. The calls were coming from all over Texas, where abortion is currently banned at about six weeks, before many women know they are pregnant. They wanted to know if they could get an abortion in Louisiana instead.

"The phone has been ringing off the wall, patients attempting to get in," Pittman said. But appointments were scarce. When I spoke with her on Thursday, Hope Medical Clinic was the only functioning abortion clinic in the state of Louisiana; the other two remaining clinics were closed due to power outages caused by Hurricane Ida. "Right now we are booked out three, possibly four weeks just to get in for that first visit," Pittman said, noting that a state-mandated waiting period requires patients to come to the clinic twice. "We're going to see women who are terminating later in the pregnancy than desired because they simply can't get in quickly enough," she said. Others, she feared, wouldn't be able to get an abortion at all. "Of course it's going to be the women who have no money," she added. "It's always the women without the means that suffer the most."

In the wake of SB 8, which went into effect on Wednesday, many clinics in Texas are still providing abortions for patients up to six-weeks pregnant, or before embryonic cardiac activity can be detected. Everyone else—estimated to be about 85 percent of all abortion patients—is now being referred out of state. As a result, clinics in Oklahoma, Louisiana, New Mexico, Colorado, and Kansas are being inundated with a surge of pregnant people who are racing against the clock for care. Yet, in many of these states, years of constant antiabortion attacks have eroded the existing reproductive health infrastructure, leaving a fragile system that is ill-equipped to absorb the additional demand.

"The second largest state in the country goes dark on a service and everyone else surrounding is trying to support and provide care," said Emily Wales, interim president and CEO of Planned Parenthood Great Plains, which covers Arkansas, Kansas, and Oklahoma. Clinics in all three states are seeing an increase in Texas patients, she said, especially in Oklahoma. At the same time, abortion access is under attack there; five new abortion restrictions are set to go into effect on November 1. "It feels a little bit like it's whack-a-mole right now in trying to beat back what are medically unnecessary requirements to ensure ongoing access," Wales said.

While other states have passed similar six-week abortion bans, the Texas law is the only one that has been allowed to go into effect. That's because of the unique way it was drafted. The state does not enforce the law. Instead, SB 8 deputizes regular people to file civil lawsuits against doctors or anyone else who knowingly "aids or abets" an abortion. The law appears to have been intentionally designed this way to thwart judicial action.

At Trust Women's clinic in Oklahoma City, which is one of the closest abortion clinics for people in north Texas, abortion appointments are already being booked three weeks into September, just like at Hope Medical Clinic in Louisiana. "All of our doctors fly in from other states," explained Zack Gingrich-Gaylord, communications director for Trust Women. "We're currently asking them to consider working additional days, but of course, our doctors also practice medicine in their home states as well." Trust Women has another clinic in Wichita, Kansas, with slightly more availability, but to get there, Texas patients must travel even further. "We've already started seeing some of those Texas patients today, and we've got some scheduled tomorrow," said Ashley Brink, the Wichita clinic director. "It's been a really emotional time. A lot of these folks, they're scared, they're confused, they're sad."

Kristina Tocce, medical director at Planned Parenthood of the Rocky Mountains, said she was seeing the same uptick in Colorado and New Mexico. "I'm very nervous for patients who need services immediately because this was an immediate hard stop to abortion services in Texas without a clear path for those patients as to where they can go," she said. "Texas is essentially a pre-*Roe* world now."

The distance to the nearest clinic is only one of the problems that Texas patients now face, said Alan Braid, the owner and medical director of Alamo Women's Reproductive Services in San Antonio. Many patients are already mothers, and cannot leave their jobs or their children for the length of time needed to access care in another state. Some are undocumented and cannot travel with ease.

"It sounds very easy—oh well, you can't get it in Texas, just go to Oklahoma, New Mexico. But the people that we see—that hourly wage patient, the single mom, the people that don't have the means to travel—it's impossible for them," he said. "That's like saying well, just hop on a plane and, you know, go to France. It's beautiful there, you can get an abortion and then take a walk down the Champs-Élysées."

Braid, who has been providing abortion care in Texas since he began his OB/GYN internship in 1972, said this was the worst climate he had ever seen for reproductive rights in Texas since before *Roe v. Wade*. The new law, with its vigilante-enforcement scheme, is spreading fear and distrust. "You can feel it in the room," he said. "It hangs heavy." As a provider, he said, he is usually optimistic that he can support his patients and meet their needs. "Now, when I walk in the room, I have huge doubts about whether I'm going to be able to help," he said. "I'm not used to that."

He expressed deep concern about what patients will do to obtain abortions if they can't get one inside Texas when they need it. He still has a powerful memory of three teenagers dying from septic shock and organ failure after obtaining back-alley abortions back when he was an intern in 1972.

"That's where we're headed," he said. "I promise you that people are going to cross the border to Mexico. They're going to self-induce."

[From the AP News, Sept. 2, 2021]

NEW TEXAS ABORTION LAW PUSHES WOMEN TO OUT-OF-STATE CLINICS

Even before a strict abortion ban took effect in Texas this week, clinics in neighboring states were fielding growing numbers of calls from women desperate for options.

An Oklahoma clinic had received more than double its number of typical inquiries, two-thirds of them from Texas. A Kansas clinic is anticipating a patient increase of up

to 40% based on calls from women in Texas. A Colorado clinic that already had started seeing more patients from other states was preparing to ramp up supplies and staffing in anticipation of the law taking effect.

The Texas law, allowed to stand in a decision Thursday by the U.S. Supreme Court, bans abortions once medical professionals can detect cardiac activity, typically around six weeks. In a highly unusual twist, enforcement will be done by private citizens who can sue anyone they believe is violating the law.

"There's real panic about how are they going to get an abortion within six weeks," said Anna Rupani, co-director of Fund Texas Choice, one of several nonprofits that help pay for travel and other expenses for patients seeking out-of-state abortions. "There's this fear that if I can't get it done in six weeks, I may not be able to get it done because I may not be able to leave my job or my family for more than a day."

Traveling for an abortion may be impossible for women who would struggle to find child care or take time off work. And for those without legal U.S. status along Texas' southern border, traveling to an abortion clinic also entails the risk of getting stopped at a checkpoint.

Fund Texas Choice is among the groups seeking to expand a network that helps women in Texas and other places with restrictive abortion laws end their pregnancies in other states. It already has seen more women reaching out. The organization typically handles 10 new cases per week but received 10 calls from new clients just Wednesday, when the law took effect.

The phenomenon is not new. Women have been increasingly seeking out-of-state abortions as Republican legislatures and governors have passed ever-tighter abortion laws, particularly in the South. At least 276,000 women terminated their pregnancies outside their home state between 2012 and 2017, according to a 2019 Associated Press analysis of state and federal data.

The trend appears to have accelerated over the past year. Abortion clinics in neighboring states began seeing an uptick in calls from Texas after Gov. Greg Abbott banned abortions in March 2020 for nearly a month under a COVID-19 executive order.

The number of Texans seeking abortions in Planned Parenthood clinics in the Rocky Mountain region, which covers Colorado, New Mexico, Wyoming and southern Nevada, was 12 times higher that month. In California, 7,000 patients came from other states to Planned Parenthood clinics in 2020.

The number of Texans getting abortions in Kansas jumped from 25 in 2019 to 289 last year. The Trust Women clinic in Wichita accounted for 203 of those procedures in a three-month period. Those patients traveled an average of 650 miles (1,000 kilometers), Trust Women spokesman Zack Gingrich-Gaylord said.

"Last year was a dress rehearsal," he said, predicting similar numbers under the new Texas law.

One woman discovered she was pregnant just as Abbott's emergency order banning abortions was lifted. She and her partner had lost their jobs in San Antonio during the pandemic.

"We didn't know which way the world was going to go with everything shut down and no change in sight," said Miranda, who spoke on the condition that only her first name be used for fear of harassment and intimidation. "The last thing I wanted to do was be pregnant."

She struggled to find an abortion clinic that could help her. An online search led her to Fund Texas Choice and the Lilith Fund, another organization that offers financial as-

sistance to Texans seeking abortions. They offered to pay for a flight to New Mexico.

"It's so comforting because it's like someone saying, 'We got you. Let's take care of this together,'" Miranda said.

Eventually, she found an appointment at a clinic in Dallas, a five-hour drive away. The groups helped with gas and lodging, aid that will be even more important with the new law, Miranda said.

"To be able to help me in a time of need when I had nothing, not even a job—that's something I think a lot of women would benefit from if they knew those options were there," she said.

Trust Women Wichita clinic director Ashley Brink said the phones have been busier than normal this week with potential patients from Texas and beyond. Women also have been calling from Louisiana and Alabama who would typically get abortion care in Texas but are having to travel even farther.

The clinic typically sees 40 to 50 abortion patients in a week and now is expecting an additional 15 to 20.

At Trust Women's clinic in Oklahoma City, 80 appointments were scheduled over the past two days, more than double the typical amount, co-executive director Rebecca Tong said. Two-thirds were from Texas, and the earliest opening was three weeks out.

"Oklahoma has just barely enough clinics for the amount of people here," Tong said. "If anyone is thinking, 'Oh, they can just go out of state, it'll be so easy,' a lot of clinics in the Midwest and South, we don't do abortion care five days a week."

Oklahoma providers also face the potential for abortion restrictions similar to those in Texas in a matter of months.

In recent months, 15% of patients supported by Cobalt, an abortion access advocacy group in Colorado, were from out of state, president Karen Middleton said. She expects that number to keep rising.

The group administers a fund to cover the cost of the procedure, travel, lodging and meals. It began preparing for a potential influx of patients from Texas several weeks ago.

"We reached out to everyone who provides abortion care in the state of Colorado," Middleton said. "We asked them to be ready and to let us know if they could handle increased capacity."

Traveling for the procedure may still be out of reach for some. Women without legal U.S. status might turn to abortion medication, said Diana Gomez, advocacy manager with Progress Texas, though even that option is in question.

Several Republican-led states have passed laws making it harder to access the pills and banning prescriptions through virtual health visits. Texas is considering similar restrictions, which could force women to get pills by mail for do-it-yourself abortions or other methods.

"They are going to have to go underground and find alternative means in our state," Gomez said.

[From TIME, Sept. 23, 2021]

#### FLORIDA LAWMAKER PROPOSES ABORTION BAN THAT MIMICS TEXAS SB-8 LAW

A Florida legislator has proposed banning most abortions in the state and allowing lawsuits against doctors who violate it, mirroring a Texas law that instituted the strictest abortion restrictions in the U.S.

It wasn't immediately clear how much support the bill would garner. The Republican-controlled Florida legislature has shown significant support for tighter abortion policies, but Governor Ron DeSantis said he hadn't reviewed this specific proposal and the GOP House speaker was similarly noncommittal on Wednesday.

The bill, proposed by state Representative Webster Barnaby, a Republican, would require doctors in Florida to perform tests to determine if a fetus has a detectable heartbeat before performing an abortion.

If a physician detects a heartbeat, according to the bill, abortion would be prohibited. The measure also would allow doctors to be sued if suspected of performing an abortion after detecting a heartbeat, matching a powerful provision in the Texas law, known as Senate Bill Eight, or SB-8.

The bill appeared to be a clear example of a Texas copycat law in another large, GOP-controlled state. In the days after the Texas law took effect, abortion clinics turned away hundreds of patients. It was seen by abortion-rights supporters as an end-run around *Roe v. Wade*, the 1973 Supreme Court decision that has been the foundation of abortion rights in the U.S. ever since.

Florida's Republican House Speaker Chris Sprowls said through a spokesman that he supported stricter abortion restrictions, but said that any bill brought to the floor would have to withstand judicial scrutiny.

"We look forward to bringing to the Floor a bill that saves every unborn life possible," he said. "I have asked House Judiciary Committee Chairwoman Erin Grall and House Health & Human Services Chairwoman Colleen Burton to review the various proposals, look at other ideas, and take point on this issue this Session."

Still, the Florida proposal sparked immediate condemnation from abortion rights advocates, who called legislation unconstitutional and part of a flurry of harsh restrictions on women's rights.

"We are horrified to see anti-choice politicians in Florida following in Texas' footsteps, and there's no question that lawmakers hostile to reproductive freedom in other states will do the same," Adrienne Kimmell, acting president of Nara Pro-Choice America, said in a statement.

Early this month, a sharply divided U.S. Supreme Court refused to block the Texas law, which outlaws most abortions after six weeks of pregnancy. SB-8, bars abortion after a fetal heartbeat can be detected and puts clinics at risk of being shut down if they are found to be in violation.

Asked about Barnaby's bill on Wednesday in Kissimmee, DeSantis said he considered his record "100% pro-life" but added that he had not seen it.

DeSantis, a Republican seen as a potential presidential candidate, has rejected coronavirus mask mandates and so-called vaccine passports, saying his position is largely about an individual's right to determine their healthcare choices. He said Wednesday that the abortion question was different because "another life is at stake."

Democratic candidates vying to replace DeSantis in the 2022 election firmly opposed the legislation.

"This is a direct attack on a woman's right to choose," Charlie Crist, a former governor, said on Twitter. "We're going to have to fight tooth and nail to protect reproductive freedom."

Mrs. RODGERS of Washington. Madam Speaker, I reserve the balance of my time.

Ms. DEGETTE. Madam Speaker, I am ready to close, whenever the gentlewoman is ready. I reserve the balance of my time.

□ 1045

Mrs. RODGERS of Washington. Madam Speaker, I yield 2 minutes to the gentlewoman from Texas (Ms. VAN DUYN), who is a champion for life.

Ms. VAN DUYNE. Madam Speaker, years ago, I, like many women, suffered a miscarriage. I should have been able to hold my son in my arms, but that was not God's plan. Years later, I still grieve that loss—and not the loss of a generic cluster of cells, but an actual baby who would have been about this size. My son had his own unique set of DNA, fingerprints, blood type, and a heartbeat—every marker that we use to identify a human being.

Pregnancy is difficult on a policy and personal level, but to deny that a child growing inside a woman is nothing more than an inconvenience is to ignore the value of life. Losing a child changed who I was, and it is the same for most women. We can't pretend that this loss doesn't have lifelong consequences.

Instead of promoting ways for women to end their pregnancies, we should be helping expectant mothers find the medical, emotional, and financial support they need. But that has never been the Democrats' focus. The party that claims to protect women is actively supporting policies that devalue the lives of women and children across the globe. Their policies have turned the human trafficking of children into a multibillion dollar industry and supported a terrorist regime since Afghanistan's takeover that went from educating and valuing the contribution of women to whipping them in the streets.

This bill is called the Women's Health Protection Act. But make no mistake, Madam Speaker, no woman is protected under this bill. Rather, it authorizes killing for the sake of convenience. Innocent human lives are either valued or they are not. This bill is merely another example of the dehumanizing policy platform the Democrats have adopted. America is founded on the protection of life.

Madam Speaker, as a Texas woman, a mother, and an American, I encourage the Chamber to reject this barbaric bill and embrace life.

Ms. DEGETTE. Madam Speaker, I continue to reserve the balance of my time.

Mrs. RODGERS of Washington. Madam Speaker, I yield 2 minutes to the gentlewoman from Louisiana (Ms. LETLOW), who is the 31st pro-life Congresswoman.

Ms. LETLOW. Madam Speaker, I rise to offer an amendment to this bill.

However, before I talk about the amendment, I think it is important for the House to note that the legislation before us is perhaps the most extreme abortion measure that Congress has ever considered. It will overturn countless protections for the unborn that States have already put into place, including those in my home State of Louisiana.

As both a woman and, most importantly, a mother of two children, I feel uniquely qualified to speak about this issue. I have experienced firsthand the miracle of life and know the incredible

intricacy of how a child is formed in the womb. Intimately knowing the special bond that grows between a mother and a child over those 9 months, I do not understand how we can pass this bill, a law that will allow an abortion to be performed up until the actual moment of birth, despite the fact that the child has a fully developed heart and can feel pain.

The amendment I am bringing forward is the text of the Born-Alive Abortion Survivors Protection Act in which my distinguished colleague from Missouri, ANN WAGNER, has been an outstanding leader.

This amendment is simple, straightforward, and the right thing to do. It would ensure that newborn children who survive an abortion are given the same crucial, lifesaving medical care that any infant would receive.

The most transformational moment in my life was when I held my two children in my arms for the first time. I have always considered myself to be pro-life, but I never truly understood the sanctity of life until that moment. I can't image why anybody would intentionally deny a precious child taking his first beautiful, beautiful breaths of life the very care that would keep them alive.

This language has received bipartisan support in the past, and I hope my colleagues across the aisle will join us in voting in favor of this important measure that will truly save the lives of countless children.

Madam Speaker, I ask unanimous consent to include the text of the amendment in the RECORD immediately prior to the vote on the motion to recommit.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Louisiana?

There was no objection.

Ms. DEGETTE. I continue to reserve the balance of my time, Madam Speaker.

Mrs. RODGERS of Washington. Madam Speaker, I urge all of my colleagues to stop this bill. Open your minds to science and technology. Look and see the mysteries of the mother's womb. Open your ears to the cries of the unborn. May hearts break, and may we celebrate life—life in the United States of America—life for the living and the unborn.

Vote "no."

Madam Speaker, I yield back the balance of my time.

Ms. DEGETTE. Madam Speaker, I would like to thank JUDY CHU, the author of this legislation who has been fighting tirelessly for years, also BARBARA LEE, my co-chair of the Pro-Choice Caucus, and to all of our colleagues who value Americans' freedoms and the freedom of women to have the full range of healthcare that they need.

This bill codifies the content of the law of the land, *Roe v. Wade*, no more and no less.

The overheated and incorrect rhetoric on the other side of the aisle is

shameful. It is shameful because it denies the freedom of all Americans to get the healthcare services that they need and to which they are entitled.

Madam Speaker, we are a country of freedom, and we are a country of freedom of religion. As a practicing Christian, I am offended by the efforts on the other side of the aisle for people to impose their—their personal—religious views on me as a Christian.

Every woman and every man in this country deserves the freedom to exercise their religion and also to exercise their ability to get the healthcare that they need.

For more than 50 years, as so many of my wonderful colleagues said, women across this country have had the right to get the abortion care they need because of a landmark decision made right across the street. But that right is being severely undermined in States across the country like Texas, Mississippi, and other States.

For people in Texas and these other States, 50 years of precedent and healthcare access is being undermined as we speak. There are more than 500 laws that have been introduced in States across this country that would restrict the ability of Americans to get the healthcare that they need and deserve. As a result, more than 90 percent of American counties no longer have abortion clinics. Some people might think that is good, but the vast majority of Americans believe that it is the choice of a woman and her healthcare provider about what healthcare she should receive.

So today, if the Justices across the street won't act to protect this freedom of healthcare, this House of Representatives will.

I will say it again: the decision of a woman to have an abortion should be made between her and her doctor. The last thing the women in this country want is a bunch of politicians in Washington, D.C., or in Austin, Texas, or someone else telling them what their healthcare should be.

So, therefore, let's codify *Roe v. Wade*. Let's codify these rights. Let's stop the histrionics and inaccurate rhetoric. Let's oppose the motion to recommit. Let's support this wonderful bill, the Women's Health Protection Act.

Madam Speaker, I urge all of my colleagues to vote "yes", and I yield back the balance of my time.

Mr. ISSA. Madam Speaker, I rise today to urge my colleagues and this House to oppose H.R. 3755. This legislation overrides nearly all pro-life protections on the books and codifies a federal right to abortion at any stage of pregnancy until birth. This bill isn't just misleading. It's a radical departure from the national consensus that exists in America right now in favor of life. But if H.R. 3755 goes forward, laws that protect unborn children with Down Syndrome and babies with other disabilities go away everywhere. Laws allow parents to be involved in their minor children's decision-making disappear. Laws that provide for medical consultations prior to this procedure—



gone. This isn't just politics as usual. It's a power play that targets the powerless. It should never come to this. There is a common-sense consensus on this issue. A great majority of the American people want to see life protected. This is worth the fight. This is the time to stand up for our most vulnerable. This is the time to reach for what matters most. This is the time to choose life. H.R. 3755 must not become law of the land.

Ms. ADAMS. Madam Speaker, I want to amplify the voice of Calla Hales, a woman in my district who is both an abortion care provider, and a mother.

"Last year, I made the choice to have a child with my husband.

What I didn't choose was prenatal checkups with COVID precautions. I didn't choose the complications I had during my pregnancy. I didn't choose delivering my amazing baby girl without my family because the pandemic limited the visitors in the maternity ward.

I didn't choose worrying every day if she would be safe from the coronavirus, despite her pulmonary issues.

I am proud of the choice that I made, in spite of everything that's gone wrong over the past two years.

But no one should ever be forced to make that choice. No person should be forced to carry a pregnancy to term, during a global pandemic, or any other time."

Ms. CASTOR of Florida. Madam Speaker, I rise in strong support of H.R. 3755, the Women's Health Protection Act. I want to thank my colleague Rep. JUDY CHU for leading the charge on this important legislation to protect the full range of health care, including abortion.

Every American deserves to live a safe and healthy life, and that means ensuring that everyone has access to the health services they need including contraceptives, checkups, abortion care, cancer screenings, pre-natal visits and more. The full range of health care. But too often in America access to high-quality, affordable health care has been limited due to racial disparities or economic disparities or where someone lives.

I'm really proud of what Democrats have done over the decades to improve the lives of American families and improve their health care, Medicare, Medicaid, the Affordable Care Act and children's health insurance, but we're in a moment in time where there's a radical fringe trying to take over these decisions.

We must remember that the decision about when, whether or how to become a parent is a deeply personal life decision. It's a decision for a person and their family; it is not a decision for politicians in Washington or in state capitols across this country. Americans do not want to outsource these important fundamental life decisions to politicians. And I hope we can agree that we should not treat people differently just because they are working to make ends meet, or because of the color of their skin or where they live. As fundamental human dignity means being able to make decisions about your pathway in life, being able to determine your own pathway in life for yourself, not have it be made by some politician. I have to say it is so alarming to see this radical move by Republicans in Congress and in the recent extreme new law in Texas that would effectively ban abortion.

For too long, we have seen Republicans across this country attack family planning and reproductive health care, including abortion and contraceptives. It's radical and it's wrong.

Well good news, we are going to do our job as members of Congress today to put people's health, safety and real needs first. We've got to ensure that all people no matter who they are, where they live and how much they make and the color of their skin, have access to reproductive health care—including abortion—that they need, and they deserve.

I urge my colleagues to make health care accessible to all Americans by supporting H.R. 3755.

Mr. LATTA. Madam Speaker, the Women's Health Protection Act (H.R. 3755)—otherwise known as the Abortion on Demand Act—is an extreme measure that would impose abortion on demand nationwide, at any stage of pregnancy, through federal statute. This would result in the elimination of every state's pro-life laws and protections. Overriding state pro-life laws and prohibiting states from enacting legislation protecting unborn children would make protections for babies with Down syndrome and other disabilities illegal. Plain and simple, this legislation is extreme.

This legislation is radically out of step with the American public, who do not support abortions with no limits. According to the Associated Press, 80 percent of Americans say abortion should be illegal in the third trimester.

This bill would create a national standard to allow for abortions of unborn children for any reason and at any stage of pregnancy up until birth. A better and more accurate name for this bill would be the Abortion on Demand until Birth Act—because it is clear the focus of this bill is not protecting women's health like the current name suggests.

Abortion ends the life of a whole, separate, unique, living human being. Tragically, abortion continues to put women in danger, takes the life of innocent children, and fails to recognize the dignity of all lives, regardless of how small. I adamantly oppose this legislation and any legislation that fails to protect the unborn.

Ms. MOORE of Wisconsin. Madam Speaker, abortion care is healthcare.

The Women's Health Protection Act protects the right of healthcare providers to provide abortion care free from undue burdens.

This bill is needed now more than ever with Texas creating the harshest most inhumane abortion ban. And for all the men in this room—that is one missed period. One.

And frankly, I'm old enough to remember what this country looked like before Roe . . .

Such draconian laws disproportionately impact Black, indigenous, LGBTQ+ individuals, and especially those experiencing domestic violence and sexual assault.

Abortion care is essential. Period.

The SPEAKER pro tempore (Ms. JACKSON LEE). All time for debate has expired.

Pursuant to House Resolution 667, the previous question is ordered on the bill, as amended.

The question is on the engrossment and third reading of the bill.

The bill was ordered to be engrossed and read a third time, and was read the third time.

#### MOTION TO RECOMMIT

Ms. LETLOW. Madam Speaker, I have a motion to recommit at the desk.

The SPEAKER pro tempore. The Clerk will report the motion to recommit.

The Clerk read as follows:

Ms. Letlow moves to recommit the bill H.R. 3755 to the Committee on Energy and Commerce.

The material previously referred to by Ms. LETLOW is as follows:

At the end of the bill, add the following new section:

#### SECTION 10. BORN-ALIVE ABORTION SURVIVORS PROTECTION.

(a) SHORT TITLE.—This section may be cited as the "Born-Alive Abortion Survivors Protection Act".

(b) FINDINGS; CONSTITUTIONAL AUTHORITY.—

(1) FINDINGS.—Congress finds as follows:

(A) If an abortion results in the live birth of an infant, the infant is a legal person for all purposes under the laws of the United States, and entitled to all the protections of such laws.

(B) Any infant born alive after an abortion or within a hospital, clinic, or other facility has the same claim to the protection of the law that would arise for any newborn, or for any person who comes to a hospital, clinic, or other facility for screening and treatment or otherwise becomes a patient within its care.

(2) CONSTITUTIONAL AUTHORITY.—In accordance with the above findings, Congress enacts the following pursuant to Congress' power under—

(A) section 5 of the 14th Amendment, including the power to enforce the prohibition on government action denying equal protection of the laws; and

(B) section 8 of article I to make all laws necessary and proper for carrying into execution the powers vested by the Constitution of the United States, including the power to regulate commerce under clause 3 of such section.

(c) BORN-ALIVE INFANTS PROTECTION.—

(1) REQUIREMENTS PERTAINING TO BORN-ALIVE ABORTION SURVIVORS.—Chapter 74 of title 18, United States Code, is amended by inserting after section 1531 the following:

#### "§ 1532. Requirements pertaining to born-alive abortion survivors

"(a) REQUIREMENTS FOR HEALTH CARE PRACTITIONERS.—In the case of an abortion or attempted abortion that results in a child born alive (as defined in section 8 of title 1, United States Code (commonly known as the 'Born-Alive Infants Protection Act')):

"(1) DEGREE OF CARE REQUIRED; IMMEDIATE ADMISSION TO A HOSPITAL.—Any health care practitioner present at the time the child is born alive shall—

"(A) exercise the same degree of professional skill, care, and diligence to preserve the life and health of the child as a reasonably diligent and conscientious health care practitioner would render to any other child born alive at the same gestational age; and

"(B) following the exercise of skill, care, and diligence required under subparagraph (A), ensure that the child born alive is immediately transported and admitted to a hospital.

"(2) MANDATORY REPORTING OF VIOLATIONS.—A health care practitioner or any employee of a hospital, a physician's office, or an abortion clinic who has knowledge of a failure to comply with the requirements of paragraph (1) shall immediately report the failure to an appropriate State or Federal law enforcement agency, or to both.

"(b) PENALTIES.—

"(1) IN GENERAL.—Whoever violates subsection (a) shall be fined under this title or imprisoned for not more than 5 years, or both.

"(2) INTENTIONAL KILLING OF CHILD BORN ALIVE.—Whoever intentionally performs or attempts to perform an overt act that kills

a child born alive described under subsection (a), shall be punished as under section 1111 of this title for intentionally killing or attempting to kill a human being.

“(c) BAR TO PROSECUTION.—The mother of a child born alive described under subsection (a) may not be prosecuted under this section, for conspiracy to violate this section, or for an offense under section 3 or 4 of this title based on such a violation.

“(d) CIVIL REMEDIES.—

“(1) CIVIL ACTION BY A WOMAN ON WHOM AN ABORTION IS PERFORMED.—If a child is born alive and there is a violation of subsection (a), the woman upon whom the abortion was performed or attempted may, in a civil action against any person who committed the violation, obtain appropriate relief.

“(2) APPROPRIATE RELIEF.—Appropriate relief in a civil action under this subsection includes—

“(A) objectively verifiable money damage for all injuries, psychological and physical, occasioned by the violation of subsection (a);

“(B) statutory damages equal to 3 times the cost of the abortion or attempted abortion; and

“(C) punitive damages.

“(3) ATTORNEY’S FEE FOR PLAINTIFF.—The court shall award a reasonable attorney’s fee to a prevailing plaintiff in a civil action under this subsection.

“(4) ATTORNEY’S FEE FOR DEFENDANT.—If a defendant in a civil action under this subsection prevails and the court finds that the plaintiff’s suit was frivolous, the court shall award a reasonable attorney’s fee in favor of the defendant against the plaintiff.

“(e) DEFINITIONS.—In this section the following definitions apply:

“(1) ABORTION.—The term ‘abortion’ means the use or prescription of any instrument, medicine, drug, or any other substance or device—

“(A) to intentionally kill the unborn child of a woman known to be pregnant; or

“(B) to intentionally terminate the pregnancy of a woman known to be pregnant, with an intention other than—

“(i) after viability, to produce a live birth and preserve the life and health of the child born alive; or

“(ii) to remove a dead unborn child.

“(2) ATTEMPT.—The term ‘attempt’, with respect to an abortion, means conduct that, under the circumstances as the actor believes them to be, constitutes a substantial step in a course of conduct planned to culminate in performing an abortion.”.

(2) CLERICAL AMENDMENT.—The table of sections for chapter 74 of title 18, United States Code, is amended by inserting after the item pertaining to section 1531 the following:

“1532. Requirements pertaining to born-alive abortion survivors.”.

(3) CHAPTER HEADING AMENDMENTS.—

(A) CHAPTER HEADING IN CHAPTER.—The chapter heading for chapter 74 of title 18, United States Code, is amended by striking “**Partial-Birth Abortions**” and inserting “**Abortions**”.

(B) TABLE OF CHAPTERS FOR PART I.—The item relating to chapter 74 in the table of chapters at the beginning of part I of title 18, United States Code, is amended by striking “**Partial-Birth Abortions**” and inserting “**Abortions**”.

The SPEAKER pro tempore. Pursuant to clause 2(b) of rule XIX, the previous question is ordered on the motion to recommit.

The question is on the motion to recommit.

The question was taken; and the Speaker pro tempore announced that the noes appeared to have it.

Ms. LETLOW. Madam Speaker, on that I demand the yeas and nays.

The SPEAKER pro tempore. Pursuant to section 3(s) of House Resolution 8, the yeas and nays are ordered.

The vote was taken by electronic device, and there were—yeas 210, nays 219, not voting 2, as follows:

[Roll No. 294]

YEAS—210

Aderholt	Gonzales, Tony	Mooney
Allen	Gonzalez (OH)	Moore (AL)
Amodei	Good (VA)	Moore (UT)
Armstrong	Gooden (TX)	Mullin
Arrington	Gosar	Murphy (NC)
Babin	Granger	Nehls
Bacon	Graves (LA)	Newhouse
Baird	Graves (MO)	Norman
Balderson	Green (TN)	Nunes
Banks	Greene (GA)	Obernolte
Barr	Griffith	Owens
Bentz	Grothman	Palazzo
Bergman	Guest	Palmer
Bice (OK)	Guthrie	Pence
Biggs	Hagedorn	Perry
Bilirakis	Harris	Pfluger
Bishop (NC)	Harshbarger	Posey
Boebert	Hartzler	Reed
Bost	Hern	Reschenthaler
Brady	Herrell	Rice (SC)
Brooks	Herrera Beutler	Rodgers (WA)
Buchanan	Hice (GA)	Rodgers (AL)
Buck	Higgins (LA)	Rogers (KY)
Bucshon	Hill	Rose
Budd	Hinson	Rosendale
Burchett	Hollingsworth	Rouzer
Burgess	Hudson	Roy
Calvert	Huizenga	Rutherford
Cammack	Issa	Salazar
Carl	Jackson	Scalise
Carter (GA)	Jacobs (NY)	Schweikert
Carter (TX)	Johnson (LA)	Scott, Austin
Cawthorn	Johnson (OH)	Sessions
Chabot	Johnson (SD)	Simpson
Cline	Jordan	Smith (MO)
Cloud	Joyce (OH)	Smith (NE)
Clyde	Joyce (PA)	Smith (NJ)
Cole	Katko	Smucker
Comer	Keller	Spartz
Crawford	Kelly (MS)	Staubert
Crenshaw	Kelly (PA)	Steel
Curtis	Kim (CA)	Stefanik
Davidson	Kinzinger	Steil
Davis, Rodney	Kustoff	Steube
DesJarlais	LaHood	Stewart
Diaz-Balart	LaMalfa	Taylor
Donalds	Lamborn	Tenney
Duncan	Latta	Thompson (PA)
Dunn	LaTurner	Tiffany
Elizy	Letlow	Timmons
Emmer	Long	Turner
Estes	Loudermilk	Upton
Fallon	Lucas	Valadao
Feenstra	Luetkemeyer	Van Drew
Ferguson	Mace	Van Dwyne
Fischbach	Malliotakis	Wagner
Fitzgerald	Mann	Walberg
Fitzpatrick	Massie	Walorski
Fleischmann	Mast	Waltz
Fortenberry	McCarthy	Weber (TX)
Foxx	McCaul	Webster (FL)
Franklin, C.	McClain	Wenstrup
Scott	McClintock	Westerman
Fulcher	McHenry	Williams (TX)
Gaetz	McKinley	Wilson (SC)
Gallagher	Meijer	Wittman
Garbarino	Meuser	Womack
Garcia (CA)	Miller (IL)	Young
Gibbs	Miller (WV)	Zeldin
Gimenez	Miller-Meeks	
Gohmert	Moolenaar	

NAYS—219

Adams	Bonamici	Carter (LA)
Agullar	Bourdeaux	Cartwright
Allred	Bowman	Case
Auchincloss	Boyle, Brendan	Casten
Axne	F.	Castor (FL)
Barragán	Brown	Castro (TX)
Bass	Brownley	Chu
Beatty	Bush	Ciциlline
Bera	Bustos	Clark (MA)
Beyer	Butterfield	Clarke (NY)
Bishop (GA)	Carbajal	Cleaver
Blumenauer	Cárdenas	Clyburn
Blunt Rochester	Carson	Cohen

Connolly	Kildee	Pressley
Cooper	Kilmer	Price (NC)
Correa	Kim (NJ)	Quigley
Costa	Kind	Raskin
Courtney	Kirkpatrick	Rice (NY)
Craig	Krishnamoorthi	Ross
Crist	Kuster	Roybal-Allard
Crow	Lamb	Ruiz
Cuellar	Langevin	Ruppersberger
Davids (KS)	Larsen (WA)	Rush
Davis, Danny K.	Larson (CT)	Ryan
Dean	Lawrence	Sánchez
DeFazio	Lawson (FL)	Sarbanes
DeGette	Lee (CA)	Scanlon
DeLauro	Lee (NV)	Shakowsky
DelBene	Leger Fernandez	Schiff
Delgado	Levin (CA)	Schneider
Demings	Levin (MI)	Schrader
DeSaulnier	Lieu	Schrier
Deutch	Loftgren	Scott (VA)
Dingell	Lowenthal	Scott, David
Doggett	Luria	Sewell
Doyle, Michael	Lynch	Sherman
F.	Malinowski	Sherrill
Escobar	Maloney,	Sires
Eshoo	Carolyn B.	Slotkin
Espallat	Maloney, Sean	Smith (WA)
Evans	Manning	Soto
Fletcher	Matsui	Spanberger
Foster	McBath	Speier
Frankel, Lois	McCollum	Stansbury
Gallego	McEachin	Stanton
Garamendi	McGovern	Stevens
Garcia (IL)	McNerney	Strickland
Garcia (TX)	Meeks	Suozi
Golden	Meng	Swalwell
Gomez	Mfume	Takano
Gonzalez,	Moore (WI)	Thompson (CA)
Vicente	Morelle	Thompson (MS)
Gottheimer	Moulton	Titus
Green, Al (TX)	Mrvan	Tlaib
Grijalva	Murphy (FL)	Tonko
Harder (CA)	Nadler	Torres (CA)
Hayes	Napolitano	Torres (NY)
Higgins (NY)	Neal	Trahan
Himes	Neguse	Trone
Horsford	Newman	Underwood
Houlahan	Norcross	Vargas
Hoyer	O'Halleran	Veasey
Huffman	Ocasio-Cortez	Vela
Jackson Lee	Omar	Velázquez
Jacobs (CA)	Pallone	Wasserman
Jayapal	Panetta	Schultz
Jeffries	Pappas	Waters
Johnson (GA)	Pascrell	Watson Coleman
Johnson (TX)	Payne	Welch
Jones	Perlmutter	Wexton
Kahele	Peters	Wild
Kaptur	Phillips	Williams (GA)
Keating	Pingree	Wilson (FL)
Kelly (IL)	Pocan	Yarmuth
Khanna	Porter	

NOT VOTING—2

□ 1125

Mses. SPEIER, LEGER FERNANDEZ, Mrs. CAROLYN B. MALONEY of New York, Mses. CLARK of Massachusetts, HOULAHAN, Messrs. GOMEZ, TRONE, Ms. KUSTER, Mr. DELGADO, Mses. JAYAPAL and SPANBERGER changed their vote from “yea” to “nay.”

Mrs. GREENE of Georgia and Mr. RODNEY DAVIS of Illinois changed their vote from “nay” to “yea.”

So the motion to recommit was rejected.

The result of the vote was announced as above recorded.

MEMBERS RECORDED PURSUANT TO HOUSE RESOLUTION 8, 117TH CONGRESS

Babin (Nehls)	DeSaulnier	Fulcher (Johnson)
Boyle, Brendan	(Thompson)	(OH)
F. (Jeffries)	(CA)	Gaetz (Greene)
Carter (GA)	DesJarlais	(GA)
(Rodgers (WA))	(Fleischmann)	Gallego (Gomez)
Carter (TX)	Escobar (Garcia)	Gimenez (Waltz)
(Calvert)	(TX))	Gonzalez (OH)
Craig	Frankel, Lois	(Timmons)
(McCollum)	(Clark (MA))	Gosar (Boebert)

Grijalva (Garcia (IL))	McHenry (Banks) Meng (Jeffries)	Ryan (Kildee) Sewell (Cicilline)	Roibal-Allard Ruiz	Slotkin Smith (WA)	Trahan Trone
Higgins (NY) (Tonko)	Morelle (Tonko) Napolitano (Correa)	Sires (Pallone) Stanton (Levin (CA))	Ruiz Ruppertsberger	Soto Spanberger	Underwood Vargas
Himes (Hayes) Johnson (TX) (Jeffries)	Neal (McGovern) Payne (Wasserman)	Stefanik (Miller-Meeks)	Rush Ryan	Speier Stansbury	Veasey Vela
Kim (NJ) (Underwood)	Schultz Perlmutter (Neguse)	Steube (Franklin, Scott C.)	Sánchez Sarbanes	Stanton Stevens	Velázquez Wasserman
Kirkpatrick (Levin (CA))	Peters (Rice (NY))	Strickland (Torres (NY))	Scanlon Schakowsky	Strickland Suozzi	Schultz Waters
Larson (CT) (DeLauro)	Porter (Wexton) Reschenthaler (Meuser)	Wagner (Walorski) Wilson (FL) (Hayes)	Schiff Schneider	Takano Swallow	Welch Wexton
Latta (Walberg) Lawson (FL) (Evans)	Rice (SC) (Timmons)	Rush (Underwood)	Schrader Schrier	Thompson (CA) Thompson (MS)	Wild Williams (GA)
Levin (MI) (Raskin)			Scott (VA) Scott, David	Titus Tlaib	Wilson (FL) Yarmuth
McEachin (Wexton)			Sewell Sherman	Tonko Torres (CA)	
			Sherrill Sires	Torres (NY)	

The SPEAKER pro tempore (Ms. LEE of California). The question is on the passage of the bill.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mrs. RODGERS of Washington. Madam Speaker, on that I demand the yeas and nays.

The SPEAKER pro tempore. Pursuant to section 3(s) of House Resolution 8, the yeas and nays are ordered.

The vote was taken by electronic device, and there were—yeas 218, nays 211, not voting 3, as follows:

[Roll No. 295]

YEAS—218

Adams	DeSaulnier	Lee (CA)
Aguilar	Deutch	Lee (NV)
Allred	Dingell	Leger Fernandez
Auchincloss	Doggett	Levin (CA)
Axne	Doyle, Michael	Levin (MI)
Barragán	F.	Lieu
Bass	Escobar	Lofgren
Beatty	Eshoo	Lowenthal
Bera	Español	Luria
Beyer	Evans	Lynch
Bishop (GA)	Fletcher	Malinowski
Blumenauer	Foster	Maloney
Blunt Rochester	Frankel, Lois	Carolyn B.
Bonamici	Gallego	Maloney, Sean
Bourdeaux	Garamendi	Manning
Bowman	Garcia (IL)	Matsui
Boyle, Brendan	Garcia (TX)	McBath
F.	Golden	McCollum
Brown	Gomez	McEachin
Brownley	Gonzalez,	McGovern
Bush	Vicente	McNerney
Bustos	Gottheimer	Meeks
Butterfield	Green, Al (TX)	Meng
Carbajal	Grijalva	Mfume
Cárdenas	Harder (CA)	Moore (WI)
Carson	Hayes	Morelle
Carter (LA)	Higgins (NY)	Moulton
Cartwright	Himes	Mrvan
Case	Horsford	Murphy (FL)
Casten	Houlihan	Nadler
Castor (FL)	Hoyer	Napolitano
Castro (TX)	Huffman	Neal
Chu	Jackson Lee	Neguse
Cicilline	Jacobs (CA)	Newman
Clark (MA)	Jayapal	Norcross
Clarke (NY)	Jeffries	O'Halleran
Cleaver	Johnson (GA)	Ocasio-Cortez
Clyburn	Johnson (TX)	Omar
Cohen	Jones	Pallone
Connolly	Kahele	Panetta
Cooper	Kaptur	Pappas
Correa	Keating	Pascarell
Costa	Kelly (IL)	Payne
Courtney	Khanna	Pelosi
Craig	Kildee	Perlmutter
Crist	Kilmer	Peters
Crow	Kim (NJ)	Phillips
Davids (KS)	Kind	Pingree
Davis, Danny K.	Kirkpatrick	Pocan
Dean	Krishnamoorthi	Porter
DeFazio	Kuster	Pressley
DeGette	Lamb	Price (NC)
DeLauro	Langevin	Quigley
DelBene	Larsen (WA)	Raskin
Delgado	Larson (CT)	Rice (NY)
Demings	Lawrence	Ross

Aderholt	Gohmert	Moolenaar
Allen	Gonzales, Tony	Mooney
Amodei	Gonzalez (OH)	Moore (AL)
Armstrong	Good (VA)	Moore (UT)
Arrington	Gooden (TX)	Mullin
Babin	Gosar	Murphy (NC)
Bacon	Granger	Nehls
Baird	Graves (LA)	Newhouse
Balderson	Graves (MO)	Norman
Banks	Green (TN)	Nunes
Barr	Greene (GA)	Obernolte
Bentz	Griffith	Owens
Bergman	Grothman	Palazzo
Bice (OK)	Guest	Palmer
Biggs	Guthrie	Pence
Bilirakis	Hagedorn	Perry
Bishop (NC)	Harris	Pfleger
Boebert	Harshbarger	Posey
Bost	Hartzler	Reed
Brady	Hern	Reschenthaler
Brooks	Herrell	Rice (SC)
Buchanan	Herrera Beutler	Rodgers (WA)
Buck	Hice (GA)	Rogers (AL)
Bucshon	Higgins (LA)	Rogers (KY)
Budd	Hinson	Rose
Burchett	Hollingsworth	Rosendale
Burgess	Hudson	Rouzer
Calvert	Huizenga	Roy
Cammack	Issa	Rutherford
Carl	Jackson	Salazar
Carter (GA)	Jacobs (NY)	Scalise
Carter (TX)	Johnson (LA)	Schweikert
Cawthorn	Johnson (OH)	Scott, Austin
Chabot	Johnson (SD)	Sessions
Cline	Jordan	Simpson
Cloud	Joyce (OH)	Smith (MO)
Clyde	Joyce (PA)	Smith (NE)
Cole	Katko	Smith (NJ)
Comer	Keller	Smucker
Crawford	Kelly (MS)	Spartz
Crenshaw	Kelly (PA)	Staubert
Cuellar	Kim (CA)	Steel
Curtis	Kinzinger	Stefanik
Davidson	Kustoff	Steil
Davis, Rodney	LaHood	Steube
DesJarlais	LaMalfa	Stewart
Diaz-Balart	Lamborn	Taylor
Donalds	Latta	Tenney
Duncan	LaTurner	Thompson (PA)
Dunn	Letlow	Tiffany
Elizy	Long	Timmons
Emmer	Loudermilk	Turner
Estes	Lucas	Upton
Fallon	Luetkemeyer	Valadao
Feenstra	Mace	Van Drew
Ferguson	Malliotakis	Van Dwyne
Fischbach	Mann	Wagner
Fitzgerald	Massie	Walberg
Fitzpatrick	Mast	Walorski
Fleischmann	McCarthy	Waltz
Fortenberry	McCaul	Weber (TX)
Fox	McClain	Webster (FL)
Franklin, C.	McClintock	Wenstrup
Scott	McHenry	Westerman
Fulcher	McKinley	Williams (TX)
Gaetz	Meijer	Wilson (SC)
Gallagher	Meuser	Wittman
Garbarino	Miller (IL)	Womack
Garcia (CA)	Miller (WV)	Young
Gibbs	Miller-Meeks	Zeldin
Gimenez		

NOT VOTING—3

□ 1153

Mr. CHABOT changed his vote from “yea” to “nay.”

So the bill was passed.  
The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

Mr. LAWSON of Florida. Madam Speaker, the Member, who is my designated proxy, did not submit my vote as instructed on September 24, 2021. Had I been present, I would have voted “yea” on rollcall No. 295, passage of H.R. 3755, the Women’s Health Protection Act.

#### PERSONAL EXPLANATION

Ms. CHENEY. Madam Speaker, on Friday, September 24, 2021, I was attending a funeral in Wyoming and was absent for votes. Had I been present, I would have voted: yea on rollcall No. 294 and nay on rollcall No. 295.

#### PERSONAL EXPLANATION

Mrs. LESKO. Madam Speaker, had I been present, I would have voted “yea” on rollcall No. 294 and “nay” on rollcall No. 295.

#### MEMBERS RECORDED PURSUANT TO HOUSE RESOLUTION 8, 117TH CONGRESS

Babin (Nehls)	Grijalva (Garcia (IL))	Perlmutter (Neguse)
Boyle, Brendan	Higgins (NY) (Tonko)	Peters (Rice (NY))
F. (Jeffries)	Himes (Hayes)	Porter (Wexton)
Carter (GA)	Johnson (TX) (Jeffries)	Reschenthaler (Meuser)
(Rodgers (WA))	Kim (NJ)	Rice (SC)
Carter (TX)	(Underwood)	(Timmons)
(Calvert)	Kirkpatrick (Levin (CA))	Rush (Underwood)
Craig	Larson (CT)	Ryan (Kildee)
(McCollum)	(DeLauro)	Sewell (Cicilline)
DeSaulnier	Latta (Walberg)	Sires (Pallone)
(Thompson (CA))	Levin (MI)	Stanton (Levin (CA))
DesJarlais	(Raskin)	Stefanik (Miller-Meeks)
(Fleischmann)	McEachin (Wexton)	Steube (Franklin, Scott C.)
Escobar (Garcia (TX))	McHenry (Banks) Meng (Jeffries)	Strickland (Torres (NY))
Frankel, Lois	Morelle (Tonko) Napolitano	Wagner (Walorski)
(Clark (MA))	(Correa)	Wilson (FL) (Hayes)
Fulcher (Johnson (OH))	Neal (McGovern) Payne (Wasserman)	
Gaetz (Greene (GA))	Schultz	
Gallego (Gomez)		
Gimenez (Waltz)		
Gonzalez (OH) (Timmons)		
Gosar (Boebert)		

□ 1200

#### LEGISLATIVE PROGRAM

(Mr. SCALISE asked and was given permission to address the House for 1 minute.)

Mr. SCALISE. Mr. Speaker, I rise to inquire of the majority leader the schedule for next week.

Mr. Speaker, I yield formally to the gentleman from Maryland (Mr. HOYER), my friend, the majority leader.

Mr. HOYER. Mr. Speaker, on Monday, the House will meet at 12 p.m. for morning-hour and 2 p.m. for legislative business, with votes postponed until 6:30 p.m.

On Tuesday, Wednesday, and Thursday, the House will meet at 10 a.m. for morning-hour and 12 p.m. for legislative business.

On Friday, the House will meet at 9 a.m. for legislative business.

Mr. Speaker, the House will consider several bills under suspension of the rules. The complete list of suspension bills will be announced by the close of business today.

Mr. Speaker, the Budget Committee has announced a markup for the Build

Back Better Act for tomorrow and Saturday. It is my intention to bring it to the floor next week.

This legislation will help move tens of millions of Americans closer to economic security while also making transformational investments in making childcare more affordable, helping Americans access healthcare, and addressing climate change with the seriousness that it deserves and demands.

On September 27, pursuant to the rule passed on August 24, the House will consider the Infrastructure Investment and Jobs Act. This legislation passed the Senate on a bipartisan basis last month and would create millions of good jobs all across America by investing in critical infrastructure.

That bill and the Build Back Better America Act are the essence of the vision and program that has been proposed by President Biden, which, as I said, will grow millions of jobs and make the lives of Americans more secure and safer.

Mr. Speaker, if time allows, the House may also consider three bills from the Committee on Education and Labor:

H.R. 3110, the PUMP for Nursing Mothers Act, which amends the Fair Labor Standards Act to provide workplace protections for mothers to pump breast milk in the workplace.

H.R. 3992, the Protect Older Job Applicants Act, which allows applicants to bring a disparate claim under the Age Discrimination in Employment Act of 1967 when they experience age discrimination while seeking a job.

In addition, H.R. 2119, the Family Violence Prevention and Services Improvement Act of 2021, which modifies, expands, and reauthorizes the fiscal year 2026 Family Violence and Prevention Services program, which funds emergency shelters and supports related assistance for victims of domestic violence.

Mr. Speaker, lastly, there may be additional legislative items as possible and as necessary.

Mr. SCALISE. Mr. Speaker, I thank the gentleman.

As it relates to the reconciliation bill that the Budget Committee will be taking up tomorrow, the initial estimates on that bill are that it would, roughly, add up to be about \$3.5 trillion in new taxes and spending.

There are now estimates that that number will mushroom to well over \$4.2, \$4.3 trillion or higher, but we still don't have a CBO score on the lion's share of that legislation. The word we are getting from CBO, it may be weeks or months that we would get that score.

Does the gentleman know what the timeline is for getting an actual estimate from CBO on what the cost of that legislation is and will be, come tomorrow, when the Budget Committee takes it up?

Mr. HOYER. The Budget Committee is going to take it up tomorrow. They don't need a CBO score for that. The

Budget Committee chairman is seeking a CBO score as soon as that can be attained, but I don't know that particular date that that will occur.

Clearly, this bill has been under consideration for a very long period of time, and the President proposed it a very long time ago, in the early part of this year. So it is something that the CBO has been considering, that the committee has been considering. Hopefully, the CBO can produce a score relatively quickly. But I don't, in answer to the gentleman's question, have a specific time or date.

Mr. SCALISE. Mr. Speaker, I thank the gentleman.

Then last week, I think we had about a dozen committees in Congress that took up different parts of that bill. Unfortunately, it seems that the cost keeps going up.

Could we get an assurance that before the bill actually comes to the floor for a vote before this House, we would get a CBO score to know how many trillions of dollars in new taxes and in new spending would be included and voted on before the House?

Mr. HOYER. Mr. Speaker, it is my expectation that we will be getting a score. I want to tell the gentleman it is also my understanding that the expenditures that will be proposed will be paid for.

Mr. SCALISE. And, obviously, paid for would include new taxes—

Mr. HOYER. New revenue.

Mr. SCALISE.—including things like that are in this bill. There is a tax on natural gas, which every family in America that uses natural gas to heat their homes in winter or cool their homes in summer would have to pay.

I know that President Biden had committed that nobody making under \$400,000 would pay any new amount in taxes. Clearly, that provision of the bill would violate President Biden's pledge.

I am not sure if the gentleman anticipates new taxes like that being removed from the bill so that the President's pledge would not be violated.

If you have any insight on that, I would be happy to yield.

Mr. HOYER. As I said, the Committee on Ways and Means and the Committee on Finance have worked on revenues to pay for what we are going to buy so that we do not create additional debt. That is my view, that they continue to have that intention.

There are use taxes on a lot of things, and there are also corporate taxes in that bill. There are some additional revenue items in that bill as well. But I can't tell you exactly because they have not offered a manager's amendment, which I expect to have offered at the Committee on Rules. That does not come out of the Budget Committee, as the gentleman knows.

The Budget Committee is going to put together the 12 bills and send them to the Committee on Rules, and then the Committee on Rules will act on

them. I expect a manager's amendment, but I cannot predict for the gentleman what that manager's amendment will be at this point in time.

Mr. SCALISE. Does the gentleman know if there is a possibility that the bill before the Budget Committee tomorrow, because they did expedite that hearing—just yesterday, there wasn't supposed to be a Budget Committee on Saturday to take up the reconciliation bill, so, clearly, it has been sped up. Is that because there is a possibility that the reconciliation bill could be voted on before the House next week?

Mr. HOYER. It is possible.

Mr. SCALISE. Does the gentleman have any idea on when we would find that out?

Mr. HOYER. Well, we have to see what the Budget Committee does tomorrow.

Mr. SCALISE. Well, I will be watching, for sure.

Mr. HOYER. We all will.

Mr. SCALISE. We all will.

On Monday, the schedule shows that the infrastructure bill is supposed to be coming up before the House floor. Is that going to be for debate and consideration, or will there be an actual vote on Monday night on the infrastructure bill?

Mr. HOYER. We will have to see how the debate goes on Monday, see how long that takes.

Mr. SCALISE. Well, we will be very involved in that debate as well.

As it relates to the next few weeks, there has been some talk that possibly the week of October 4 or beyond may be taken back as district work schedules to come back here.

Does the gentleman have any insight into what the schedule holds from October 4 and beyond?

Mr. HOYER. I have advised Members that, obviously, we have a lot of work to do and that we have scheduled a number of workweeks, committee workweeks—which, by the way, I think have been very successful. We started those in June of last year, and I think they worked out very well, giving the committees an opportunity to meet uninterrupted by having to come to the floor.

With votes, as we know, we continue to have the challenge not only of COVID but the variant, an additional illness spike, so we are still having votes longer than we otherwise would have. So I think that those work periods have worked very well, and there are some scheduled for October.

But I have also advised Members that we have a lot of work to do, and if we need more legislative time, we will provide for that, and Members will get sufficient notice for that. But I did want to put them on notice that we may have to have more floor time than is currently provided for by the committee workweek schedule.

But as soon as we have a sense of when those days will be needed, we will let Members know.

Mr. SCALISE. Well, we know that next week we anticipate, as the end of

the fiscal year comes, that there would be the continuing resolution possibly coming out of the Senate.

I know when it came out of the House, it was very clear that the Senate was not going to entertain the debt ceiling as part of the continuing resolution. So, clearly, the Senate is going to have to resolve what happens with the debt ceiling, although we have been told extraordinary measures would continue through October. So that is not as looming of a deadline as the September 30 government funding deadline that the CR would be involved with.

I know, on our side, we were very disappointed to see when something had to be pulled out on Tuesday, whether it was going to be the Iron Dome funding or the debt ceiling. Knowing that the Senate was not going to process the debt ceiling as part of that instrument, it would have seemed, to keep that on track, to remove the debt ceiling and deal with that separately, as the Senate ultimately will have to, and then keep the CR with the Iron Dome funding moving forward on something that could be a bipartisan vote.

Obviously, that didn't happen Tuesday. I would expect we will see something very different happen in the Senate. They may send that back to us sometime next week.

Does the gentleman have a timeline for what we should expect on legislation dealing with the funding of government prior to the September 30 deadline?

Mr. HOYER. Well, obviously, the government funding authority ends on September 30 at midnight, the end of the fiscal year, and it would be our intention to deal with whatever bill the Senate sends back to us—if, in fact, they do not take our bill—as soon as it comes to us.

We believe that it is absolutely essential not to shut down government, which is costly, disrupts the lives of the American people and those who are expecting services, and is irresponsible.

Even more irresponsible is not increasing the debt limit. I have been saddened on a regular basis that our Republican colleagues are prepared to vote for debt limits when you have a Republican President and not when you have a Democratic President, as if somehow it is the President that creates the debt.

The President doesn't create the debt. The Congress creates the debt. This is not for debt that we may create in the future. It is for debt that we have already created, either by cutting taxes, therefore cutting revenues, or by spending money.

As you know, the debt limit was substantially increased under the Trump administration in a bipartisan way. But unlike this year, Democrats joined with Republicans to ensure that the full faith and credit of the United States of America was not put at risk. And the President of the United States signed that legislation, a Republican President.

So it is, I think, very sad that our Republican friends did not join every Democrat in saying we will not put at risk the full faith and credit of the United States for debts that have been incurred.

Now, I have been here for some time, and just in terms of the public debt going up, under Bush 1, it went up 55 percent; Clinton, 37 percent; Bush 2, 86 percent; Obama, 88 percent; Trump, 39 percent.

□ 1215

Now, obviously, those figures all are based on a lower base than their successor had, but it is interesting that under Ronald Reagan, the debt went up 189 percent, and he signed every one of those. And he also urged us not to put the credit at risk.

In addition, on September 8, 2017, the Republican-controlled House voted 316-90 to suspend the debt limit through December 8, 2017, under a deal endorsed by President Trump. The "yea" votes included Majority Leader KEVIN MCCARTHY, Ways and Means Chairman KEVIN BRADY, and Conference Chair CATHY MCMORRIS RODGERS.

Again, on September 8, the Republican-controlled Senate voted 80-17 to suspend the debt limit through December 8, 2017. The "yea" votes included Majority Leader MCCONNELL, Majority Whip CORNYN, Finance Chairman Hatch, and GOP Conference Chair JOHN THUNE all voting in favor of that.

In addition, on February 9, 2018, a year later, the Republican-controlled House voted 240-186 to suspend the debt limit through March 1, 2019. Voting "yea" were Majority Leader KEVIN MCCARTHY, Majority Whip STEVE SCALISE, Ways and Means Chairman KEVIN BRADY, GOP Conference Chair CATHY MCMORRIS RODGERS, all voting for the measure.

Leader MCCONNELL has stated that it would be irresponsible not to extend either the date or the amount of the debt limit. The business roundtable has said this: Failure to let the U.S. Federal debt limit to meet the U.S. obligations would produce an otherwise avoidable crisis and pose unacceptable risk to the Nation's economic growth, job creation, and financial markets. Goldman Sachs has essentially said the same thing, the American Bankers Association, and numerous other organizations that I can mention.

So I am sorry that earlier this week the Republicans voted unanimously against keeping the government open and making sure that we did not compromise the full faith and credit of the United States of America. But I will assure the gentleman, as soon as a bill is sent back from the Senate, that we will take that up. I hope it is a responsible bill.

I hope it does what Senator MCCONNELL, under President Donald Trump, said ought to be done. Perhaps now that we have a Democratic President, somehow the fiscal responsibility does not seem as important as it did when

Donald Trump was President, and I think that is unfortunate.

I, personally, by the way, think that the debt issue is a phony issue. There are only very, very few countries that have a debt limit. The debt limit is decided when we spend money or cut revenues, not in some other venue. And once we do that, the assumption ought to be, and I think has been, that we are going to pay our debts as a country.

And the only time we came close to not doing that was about a little less than 10 years ago, and for the first time since I have been a Member of Congress, which is over 40 years, the rating of the United States was reduced, minisculely, but nevertheless reduced. A shocking consequence of playing games with the debt limit.

So I would hope that my friend would urge his party to not treat this as either a political issue or partisan issue, and would treat it as the issue it is, an issue of the fiscal responsibility and full faith and credit to the United States of America.

Mr. SCALISE. Mr. Speaker, I want to remind the gentleman that if you go back, both Republican and Democrat Presidents, whether it was a Republican Congress or a Democrat Congress, you had budget agreements that involved both agreements on spending and on debt. Bipartisan agreements.

The gentlemen should also recognize that this year there has been no such effort to reach out to the Republican side to get agreements. The gentleman is well-aware that under President Biden, while he promised during the campaign that he would work with everybody, he would work with Republicans, work with Democrats, instead, it has been a go-it-alone strategy on spending and on debt.

Very much to our opposition, we were against the trillions of new spending. We weren't consulted about the debt.

Mr. HOYER. Mr. Speaker, will the gentleman yield?

Mr. SCALISE. Mr. Speaker, I will yield, but I first need to point out, because the gentleman did mention, that when we cut taxes, the Tax Cuts and Jobs Act, that cutting taxes reduced revenue to the Treasury. Maybe under a liberal ideology that is the thought process of how economics would work, but that is not how economics worked, and it is not how reality worked.

When we cut taxes, we actually kick-started our economy. We brought millions of jobs back to America, and the Federal Treasury took in more money. Cutting taxes brought in more revenue to the Treasury. In fact, if you go look at States like New York that raised taxes to try to go after millionaires and billionaires and picking winners and losers and dividing people, as they raise tax rates, they see people moving out of their State, less revenue.

In America, when we saw higher and higher tax rates ultimately getting to a 35 percent corporate rate, highest in the industrialized world, what we also

saw was great companies moving out of America, out of America to be able to stay afloat, not to avoid paying taxes. They were still paying taxes. They were just moving to other countries where they could remain competitive because they could no longer remain competitive in America.

It was by the hundreds that we would see what are called inversions, great companies moving out of America. Now, on the left, every time they would move they would wring hands and call the company's name. We would call the companies, and say, Why are you leaving? They didn't want to leave. They wanted to stay afloat so that they didn't have to fire the thousands of America workers they had. They wanted to stay viable.

So when we cut taxes, do you know since the day the Tax Cuts and Jobs Act was signed into law, there has not been a single inversion in America. Not a single American company moved out of America. In fact, the opposite. We saw companies by the droves moving back in. We saw jobs by the millions coming back to America.

So, again, to give an economics lesson, when we cut taxes the Federal Treasury actually took in more money, not less, because people created more jobs in America. They brought jobs back to America.

Companies increased wages. In fact, the biggest wage earners—and you can go look at the Department of Labor statistics—the bigger wage earners were lowest-income workers. All that goes away if this bill coming before the Budget Committee tomorrow is to pass. I hope it doesn't. But if it does, every economics expert that looks at the success of the Tax Cuts and Jobs Act has also recognized that it will lead to millions more jobs leaving America if they raise those rates.

If you put a natural gas tax on families, estimates are over a 12 percent increase in household electricity rates on families which, by the way, would hit lower-income people the hardest. That is the reality of tax increases and tax decreases.

So that brings us to the debt ceiling. The reason we voted against it were many. One was that, for whatever reason, the majority party decided to gut the Iron Dome funding that was initially in the bill; a billion dollars to allow Israel to replenish the Iron Dome missiles that were used defending themselves against terrorist attacks from Gaza, fueled by terrorist organizations, and backed by proxies like Iran. That is one of the driving reasons that you saw all of those "no" votes.

But if you also look at where the debt came from, it came from very partisan policies. There are 14 different bills this year where the majority party waived the PAYGO rules. PAYGO was a policy that said, you pay as you go. You want to pass policy, you want to spend money, pay for it.

It is a pretty commonsense idea, except on 14 different pieces of legislation

this year, the Democrat majority waived PAYGO, racking up trillions in new debt. We didn't vote for this spending. If the majority party wants to go it alone and have a partisan spending spree that jacks up trillions of new spending and debt, then it is incumbent upon the majority party to go address the debt ceiling consequences that were created by this reckless spending.

Fourteen different times your party waived PAYGO. We didn't vote for that. But then you want us to pay for it? That is not how this works. If the majority party wants to work with us on a budget agreement, we are right here. We have never been asked to be a part of a budget agreement. We surely weren't consulted about the spending because we opposed those levels.

There were things we wanted to do, including on some of the relief packages where we felt, let's focus in on helping people who are struggling, not paying people not to work, not bailing out States that are flushed with multi-billion dollar surpluses, while sending that bill to our kids.

That is not responsible, but that is what the majority party did. And as they jacked up all that spending, they jacked up debt and bumped us against the debt limit. We are not going to be a part of that because we didn't agree with the spending. We weren't consulted on the spending.

If your party wants to spend money, your party ought to be responsible enough to deal with the consequences of it. We are more than happy to work with you on how to solve this spending and debt problem in a bipartisan way, and I yield to the gentleman.

Mr. HOYER. Mr. Speaker, I thank the gentleman.

It is hard to respond, Mr. Speaker, to a not-responsive issue on why we are not voting to extend the debt limit. MCCONNELL said he wasn't going to vote for the debt limit long before there was anything about Iron Dome. In fact, we passed Iron Dome. We passed it overwhelmingly with over 420 votes. It is now over in the Senate, and I hope they pass it immediately, which would, by the way, be faster than they would have done the CR.

Having said that, the gentleman voted for \$5 trillion of debt in 2020. It wasn't paid for. We were confronting a great crisis called COVID-19. And in a bipartisan way, we passed \$5.4 trillion of spending, the largest amount of spending, I think, in any year that I have been in this Congress.

We did it in a bipartisan way with the expectation that we would borrow that money to meet the emergency that confronted us, and that we would pay for that debt. It didn't have anything to do with politics. It didn't have anything to do with who was President of the United States. And all that verbiage was to mask the fact that, frankly, my Republican friends don't like voting to pay the bills.

They do like to cut revenues, whether or not they balance the budget. And

the good news, from their standpoint, was they inherited an economy that was going up incrementally every year.

The gentleman talks about jobs on his tax bill. Under President Obama, who inherited a tanking economy from George Bush, not withstanding the tax cuts that they had effected, during the Obama administration we created 10,838,000 jobs. During the Trump administration 6,688 net jobs. About 35 percent less. But that is irrelevant, it is a smokescreen. It is to distract.

The fact of the matter is we have incurred debt, we have incurred it in a bipartisan way. Whether the objective was defense or whether it was domestic or tax cuts, we created the debt on behalf of the United States of America. We borrowed money and we said to our creditors: we will pay you back.

It had nothing to do with Iron Dome. The Republicans had said if the debt limit was in there, they weren't going to vote for it. They were not going to take responsibility for the debt that they, in a bipartisan way, \$5.4 trillion last year, incurred, signed by Donald Trump.

Donald Trump could have stopped every nickel of that money from being spent. He did not. It was a bipartisan agreement.

□ 1230

I believe, although I don't have the figures in front of me, that Mr. SCALISE voted for every one of those bills. He can correct me if I am wrong on that.

But the debt limit is a pretense that somehow if you vote against raising the debt limit you will somehow, Mr. Speaker, solve the debt problem of the United States.

No. The way you solve that is paying your bills.

I would urge the gentleman—I don't know what is going to come back from the Senate, but I will tell you, Mr. Speaker, my experience has been, particularly over the last, about 15 years, it has been Democrats who have responded to the fiscal responsibility call of Republican Speakers—Mr. Boehner and Mr. Ryan—who couldn't get the majority of Republicans in their own party to vote for their bill exercising fiscal responsibility. I am proud to say that Democrats were there on behalf of bills sponsored, essentially—I don't know the name of the sponsor on the bill—but supported by both Speaker Boehner and Speaker Ryan. I don't have those figures in front of me, but I can bring them up perhaps next time we talk.

So I would urge my friend, let's get off this political Biden this or—I don't even know if any of those bills have passed because I don't know what list he is reading from, but, Mr. Speaker, he lists the names of bills in Congress.

We passed the rescue plan but got no Republicans on that.

Why?

Because we were over having a Republican President. So now a Democratic President was trying to make



sure that this country didn't fall through the floorboards, that our small businesses didn't fall through the floorboards, that our families and individuals didn't fall through the floorboards, and that our childcare providers didn't fall through the floorboards. So they were through voting for those bills. They were voting for them when Trump was President but stopped voting for them when Biden was President. I get that. But the debt limit is about all of us. It is about our country.

Very frankly, as Goldman Sachs and the Business Roundtable and others have said, it is about the global economy. It is about jobs. It is about working men and women having jobs and America being competitive with the rest of the world. That is what the debt limit is about, and that is what the Business Roundtable is saying, not one of our spokes-organs. That is what the Chamber of Commerce is saying.

So, yes, we can argue the specifics, the 4 million less jobs were created under Trump than were created under Obama. We can talk about that. We can talk about a larger debt under Trump in terms of actual dollars. I am not going to talk about that.

Why?

Because we incurred them together because we needed to do so because our country was in trouble and our people were in trouble.

So I will tell the gentleman we are going to—his question was, in case we all forgot it, we probably did—that we are going to deal with the bill that comes back because we are absolutely committed to making sure that the full faith and credit of the United States is not put at risk.

Mr. SCALISE. Mr. Speaker, I thank the gentleman.

I do need to correct the RECORD because the gentleman implied that the relief packages from 2020 were part of the debt ceiling that is being raised in the current legislation that is moving forward. That is just not accurate.

I have seen talking points out there, but Mr. Speaker, if you look at the trillions that my friend and I supported that were good policy, that was included in the debt ceiling negotiation from last year. It was in there. It was part of the debt ceiling negotiation from last year. That was passed on a bipartisan basis.

What we are talking about for this year, including the \$1.9 trillion that was not a bipartisan package, is new debt. What is being anticipated in the \$4 trillion, \$5 trillion-dollar-package that the Budget Committee is taking up is going to be new debt that would be included in the debt ceiling negotiation that my friend would expect us to vote for.

We don't support that new spending and that new debt. We did support the spending and the debt from last year in the relief packages that we all supported—and we paid for it—in the debt ceiling negotiations from last year.

The gentleman might have different talking points, but that is a fact. It was legislation that was voted on in a bipartisan fashion.

Mr. HOYER. I have different facts.

Mr. SCALISE. It was voted on on a bipartisan basis and was passed by Congress. Where the debt ceiling is today is ultimately going to be negotiated in the Senate, but it won't be in the bill that was sent over to the Senate on Tuesday.

The Senators have made it clear. They don't have 60 votes for that bill. It is a 60-vote bill. They might have to take it up under a reconciliation package. That is for the Senate to decide. Maybe in the next few days the Senate will decide that and send it back, but that was not something that anybody expected the Senate to pass when it left the House on Tuesday.

Mr. Speaker, I yield to the gentleman.

Mr. HOYER. Mr. Speaker, I thank the gentleman for yielding.

I will not characterize the substance of that argument. However, I believe it has no merit, Mr. Speaker, none, zero, zip.

It is as if we Democrats, when we voted three times to assure that we didn't violate the debt limit under Donald Trump, as if we would say: Well, this is not our debt, this was, after all, the debt of the tax cut of 2017, so we shouldn't pay this.

In fact, the debt, of course, like family debt, is not necessarily for the car, for the mortgage, or for the clothes that we bought for our children to go back to school. It is a cumulative debt, a cumulative debt that—by the way, under Democratic Presidents since President Truman—were increased 24 percent; under Republicans since Truman, 45 percent.

It would be ridiculous, Mr. Speaker, for me to say: Well, I am only going to pay for this debt, that debt, and this debt that I agree with.

Of course, the \$5.4 trillion that Mr. SCALISE and I voted for in 2020 is a part of the debt that we need to have to service now. In fact, what we of course did, we didn't increase the debt limit per se because politically that was very controversial because people demagogue it. So what we did was we changed the date, which is a ruse, which is a political sleight of hand. It has the same exact effect.

So, Mr. Speaker, with all due respect, the argument that it is not my debt and your debt and this—in fact, most of those bills haven't passed and haven't created any debt yet. I don't know the list, so I don't know whether they have been passed or some have passed. I presume, obviously, the rescue plan did pass, it wasn't paid for. Of course, it was approximately 30 percent of what Mr. SCALISE and I voted for in 2020.

But, nevertheless, the debt is the debt; and not to support making sure that America legally can pay that debt is irresponsible.

Mr. SCALISE. Again, this will continue as we see whatever comes out of the Budget Committee that will be trillions. We know it is trillions. We just don't know how many, maybe 4, maybe 5 trillion in new debt that the date that was put in the legislative text—it wasn't an amount, it was a date that the majority party included—in December of 2022 that maybe that changes in the Senate, but it would include the trillions, not only that were included in the \$1.9 from earlier this year that was partisan, but also on this tax-and-spend bill that is moving through Budget tomorrow.

I would like to ask one final question about other potential legislation for next week. I know the gentleman and I have had conversations in the past about bills that maybe aren't currently scheduled that could be, some of them have been added to the schedule, not all.

We know there is a crisis at our southern border. There are a number of legislative instruments that have been filed to try to confront it. I haven't seen any of those come to the floor. They are surely not listed for next week, but there are a number I would at least like to bring to the gentleman's attention to see if they could—as we are watching the border get even more out of hand—potentially give tools to the President to address it in a way where he is not addressing it today.

We know there has been a bill by Ms. HERRELL, the number of that bill is H.R. 471, the PAUSE Act, which would allow for enforcement of Title 42 in a way more clear than the administration has expressed their abilities.

We also have H.R. 4828 by Mr. KATKO which gives even more additional tools to help secure the border.

I would hope the gentleman would look at those legislative instruments. As there are maybe more days we will be here than there are legislative instruments anticipated, these could be other bills that we could take up that would deal with very pertinent and serious problems that our country is facing that aren't being addressed.

Mr. Speaker, I yield to the gentleman.

Mr. HOYER. I don't know the status of those bills. I will check on the status of those bills.

Let me say, Mr. Speaker, there is a tragedy occurring at our border. There are people in grievous circumstances and in unbearable danger in their home countries. That has been a case for some period of time, and we have some very bad people taking advantage of that and promising them a free route to America, taking advantage of that pain, that suffering, and that fear that so many people have, in this case Haitians who fled their own country, presumably many of them after an extraordinary earthquake and they are living in places that are not their homes.

We all talk about it, and we all believe that America is the greatest

country on the face of the Earth. It is. Therefore, it is not surprising that people who are in pain and grieving and are concerned for the future of their children want to come to the United States of America. But, clearly, we cannot take all of the people who would like to come to America.

Therefore, we need a system because America is made up of immigrants. It has been made strong by immigrants. It has been made successful by immigrants. It has been made a great country by immigrants.

My own father came from Denmark at the age of 32 in 1934. Almost everybody who serves in this House, some are immigrants themselves who came themselves to the country. Some at 2 years of age and some at other ages.

The gentleman is correct. We need to deal with this. We need to deal with it in a humanitarian way, in a way that honors our values and respect for individual lives and individual persons. That is one of the great, great differences that we celebrate in America, the importance that we put on the individual.

We said that we hold these truths to be self-evident that all men are created equal—today we clearly would say all men and women—and endowed not by us, not by our Constitution, and not by our laws, but by God. We have some of God's children who are fearful, scared, and running, running to a safer place. And that place for almost all the world is America.

So we have a responsibility, Mr. Speaker, to adopt a rational, comprehensive immigration reform regime where people will know the rules of coming to America. They will know the rules of how you apply, how you are processed, and how you are vetted. Whether you are coming here because you just want to come to America to succeed and to make your family live in a better neighborhood called America, or you are coming because your family and your are unsafe in the country in which you then reside, we need comprehensive immigration reform.

I would be glad to work very closely with my friend, the Republican whip from Louisiana, on seeing if we can get to that place because we have all been talking about it, all of us.

I think there is not a person in this room—I don't know about in this room, but over the years—who hasn't said our immigration system is broken, who hasn't said we need secure borders, who hasn't said we need secure borders and revealed in the fact that we are a nation of immigrants who have made us stronger so that we can get to a place where we pursue a rational policy for implementing that concept.

So I will tell my friend, I will look at those two or three pieces of legislation he mentioned and talk to the committee chairs about their status and let the gentleman know.

Mr. SCALISE. Mr. Speaker, I appreciate that, and I look forward to having those conversations with the gen-

tleman from Maryland on that and all the other issues that will come before us next week.

Mr. Speaker, I yield back the balance of my time.

□ 1245

#### ABORTION CARE IS HEALTHCARE

(Ms. UNDERWOOD asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. UNDERWOOD. Mr. Speaker, choosing whether to become a parent is one of the most important decisions a person will make in their lifetime. It is a decision we should be able to make for ourselves. But over the past decade, extremist anti-abortion politicians have passed more than 450 laws that undermine the freedom to make that decision.

Our laws should protect our rights, like the right to abortion, not control and dehumanize us. We aren't truly free unless we can control our own bodies, lives, and future.

As a nurse, I know that when people have access to a full range of healthcare services, including the full spectrum of reproductive health and maternity care, they are healthier and their families thrive.

Because abortion is healthcare.

The legislation that House Democrats passed today will protect access to healthcare and reproductive rights for all Americans. It ensures that, going forward, we all have the freedom to control our own bodies, safely care for our families, and live with dignity.

I urge my colleagues in the Senate to take it up immediately and send it to President Biden's desk.

#### HONORING THE LIFE AND SERVICE OF LANCE CORPORAL KAREEM NIKOUI

(Mr. CALVERT asked and was given permission to address the House for 1 minute.)

Mr. CALVERT. Mr. Speaker, I rise to pay tribute to a fallen marine from my congressional district. Our Nation relies upon young men and women voluntarily stepping forward to defend and protect the liberties we hold so dear. As a young man growing up in Norco, California, Lance Corporal Kareem Nikoui was inspired to answer that call.

When he joined the Marine Corps, Kareem was following in the footsteps of patriots. Like his fellow marines, he was not signing up for glory or reward but out of a sense of duty.

In his final days, Lance Corporal Kareem Nikoui was on the front lines of a mission to secure freedom for desperate people. Kareem and our other fallen heroes conducted themselves with bravery and compassion. In those dark days, they shined bright.

Our community in Riverside County, California, has stepped up to support

and embrace the Nikoui family as they grieve this unimaginable loss. We should honor Kareem by carrying the torch of service, duty, and sacrifice he so proudly advanced until his final breath.

May God comfort the Nikoui family, and may God bless America.

#### TEXAS WOMEN ARE UNITED STATES CITIZENS

(Mr. RASKIN asked and was given permission to address the House for 1 minute.)

Mr. RASKIN. Mr. Speaker, the women of Texas are citizens of the United States, but they are being treated like outlaws by their own legislature.

Under the Texas law, any person, including murderers, serial rapists, sexual harassers, January 6 insurrectionists, or Texas State legislators themselves, can sue doctors, nurses, mothers, fathers, medical personnel, simply for helping a woman in Texas exercise her constitutional rights under *Roe v. Wade* and *Planned Parenthood v. Casey* for \$10,000.

You want to give \$10,000 to a total stranger for helping your daughter through a personal crisis caused by a rape? Move to Texas.

You want to join the GOP in turning America into a nation of theocratic busybodies and vigilante bounty hunters policing other people's families? Go right ahead.

But for me, I am standing with the Constitution of the United States. I am voting for the Women's Health Protection Act, and I am proud that we are passing it today.

#### UNPRECEDENTED GOVERNMENT SPENDING

(Mr. LAMALFA asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. LAMALFA. Mr. Speaker, the \$3.5 trillion spending plan by the Democrats is the most expensive single piece of legislation in the history of this country. If passed, the Democrats will have added \$13 trillion in new spending since they took control of the House in 2019.

When combined with annual government funding and the \$1.9 trillion Biden bailout bill, the \$3.5 trillion socialist tax and spending plan would increase yearly government spending by over 73 percent each year for the next 10 years. To pay for these expensive and ill-advised policies, we would see the largest tax increase in American history, with two-thirds of employer tax increases being borne by lower and middle-income Americans.

This unprecedented spending spree is fueling inflation right now and hurting low-income and middle-income families the most, the very populations these policies purport to be helping.

Inflation is a tax on the poor, running at 7 percent on an annualized

basis since the Biden administration came in, the highest since the Carter era. Gas prices are up 41 percent. Used car prices are up 41 percent. Fish prices are up 8.5 percent. Steak prices are up 10 percent.

Inflation is hurting the purchasing power of everyday Americans.

#### HONORING THE SERVICE OF MEREDITH MCGEEHEE

(Mr. KILMER asked and was given permission to address the House for 1 minute.)

Mr. KILMER. Mr. Speaker, I rise today to recognize Meredith McGehee, the executive director of Issue One, who is leaving her post at the end of this month.

Meredith is one of the Nation's most knowledgeable and dedicated experts on Congress and ethics in politics. She is a true public servant and has devoted her career to making Congress and the Federal Government more transparent, more effective, and to making it work better for the American people.

In fact, she is among the leading advocates for many of the key laws that shape the way that Congress operates today, contributing to the formulation of the Gift Ban, the Lobbying Disclosure Act, the Congressional Accountability Act, the Bipartisan Campaign Finance Reform Act, the STOCK Act, and the establishment of the bipartisan Select Committee on the Modernization of Congress, which I now have the honor of chairing.

Of all of the ways that Meredith has had an impact, she is first and foremost, a devoted daughter of Albuquerque, a wife, and mom to Timo who, himself, is now pursuing a career in service to our country.

Mr. Speaker, I want to thank Meredith for her service and wish her all the best in the days ahead.

#### POW/MIA RECOGNITION DAY

(Mr. THOMPSON of Pennsylvania asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. THOMPSON of Pennsylvania. Mr. Speaker, last Friday, September 17, was POW/MIA Recognition Day. This important day is a time to remember the brave men and women who have yet to return home.

Currently, there are more than 80,000 American servicemembers who remain unaccounted for from World War II, the Korean War, the Vietnam War, and the Cold War, and the Gulf Wars.

Our servicemembers are the bravest among us. They answer the call to protect and defend our country in times of war and in times of peace. While many return home, some do not.

In May, I introduced the Prisoners of War and Missing in Action Trade Agreement Resolution. This resolution urges our mutually beneficial trade agreements to include a commitment

from trading partners to continue the search and recovery efforts of our Nation's missing servicemembers.

Mr. Speaker, in honor of POW/MIA Recognition Day, I urge my colleagues to join this resolution. We must uphold the eternal promise to our Armed Forces to always bring our men and women home.

In that spirit, I also want to say thank you to one of my alma maters, Penn State University, that in a stadium of about 110,000, they placed one seat that will never be filled until the last of all those who are missing will return home. That was dedicated in honor of Penn State graduate and Vietnam veteran, Major Louis Smith, who has yet to return home from that war.

#### REMEMBERING THE LIFE AND SERVICE OF ERICKA EDWARDS JONES

(Mr. CARTER of Louisiana asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. CARTER of Louisiana. Mr. Speaker, I rise today to recognize and remember and mourn the life of a dear friend and sister, Ericka Edwards Jones of Algiers, Louisiana.

She lived a life of service and activism throughout her 48 years of life, as a longtime employee of the parish courts, and staffer of former Congressman William J. Jefferson, and as chief deputy of 2nd City Court under the leadership of clerk Darren Lombard. She served with compassion and honor.

She thoroughly enjoyed politics, but, most importantly, public service. She was an incredible wife, mother, daughter, and friend. We will sorely miss her incredible smile, her leadership, her compassion for service.

She had a smile that would light up the room. Ericka was passionate, and compassionate, and generous to a fault.

My thoughts and prayers are with her, our families, and the community on this tragic loss of a true public servant.

Ericka, we will miss you, but your fingerprints will long live in the great works that you leave behind.

My thoughts and prayers are with her family, with all that knew her, and all that will remember her forever.

We will miss you deeply.

#### COUNTERING VIOLENT EXTREMISM

(Ms. JACOBS of California asked and was given permission to address the House for 1 minute.)

Ms. JACOBS of California. Mr. Speaker, the United States should not provide support to foreign military units that repeatedly commit human rights violations. That should be clear.

Yet, in Burkina Faso, Guinea, and the Democratic Republic of the Congo, military units backed by the United States did just that; terrorizing civilians in the name of security.

Backing these units is supposed to be against U.S. law, but for decades there has been one big loophole, and it is called section 127E, one specific DOD authority that authorizes support for these units without any human rights vetting.

This loophole means that we have no assurances that our operatives aren't working with partners who are in direct conflict with our values. And if we are truly focused on countering violent extremism, we have to acknowledge that abuses by security forces often propel victims into violent extremist groups.

That is why I brought forward an amendment to the NDAA to close this loophole, and I am proud to say it was adopted with bipartisan support.

My amendment ensures that we aren't contributing to the very same problems we aim to solve, and it sends a clear message. When it comes to human rights, there cannot be loopholes, exemptions, or exceptions.

#### ISSUES OF THE DAY

The SPEAKER pro tempore (Mr. TORRES of New York). Under the Speaker's announced policy of January 4, 2021, the gentleman from Texas (Mr. GOHMERT) is recognized for 60 minutes as the designee of the minority leader.

Mr. GOHMERT. Mr. Speaker, we had a bill today regarding abortion; and when I think about saving lives of innocent babies, one name that comes to mind is Henry Hyde, and another name that comes to my mind is CHRIS SMITH.

We have some people that have worked tirelessly, selflessly on this issue, and one of those people is CHRIS SMITH. He is a leader.

I am proud to yield to the gentleman from New Jersey (Mr. SMITH).

Mr. SMITH of New Jersey. Mr. Speaker, I thank the gentleman for yielding. I thank him for his leadership. And I thank the gentlewoman from Washington (Mrs. RODGERS) for her extraordinary efforts on behalf of the unborn. It has been, frankly, a team effort, and what a team.

Mr. Speaker, the legislation under consideration by the House today is deceptively titled the Women's Health Protection Act of 2021. Abortion is not healthcare, unless one construes the precious life of an unborn child to be analogous to a tumor to be excised or a disease to be vanquished.

This bill is far outside the American mainstream and goes far beyond Roe v. Wade. This bill constitutes an existential threat to unborn children and to the value of life itself.

For the first time ever, by Congressional statute, H.R. 3755 would legally authorize and enable the violent death of unborn baby girls and boys by dismemberment, decapitation, forced expulsion from the womb, deadly poisons, and other methods at any time and for any reason until birth.

A significant majority of Americans are deeply concerned about protecting

the lives of unborn children. A 2021 Marist poll found that 65 percent of Americans want *Roe v. Wade* reinterpreted by either sending the issue back to the States, or to stop legalized abortion. Of that 65 percent majority of Americans, 40 percent of Democrats would “allow certain restrictions on abortions as determined by each State.”

If enacted, this bill will nullify nearly every modest pro-life restriction ever enacted by the States, including Women’s Right to Know laws in 35 States, parental involvement statutes in 37 States, the pain-capable unborn child protection laws in 19 States, waiting periods in 26 States, and so much more.

Seventy percent of Americans, Mr. Speaker, according to the 2021 Marist poll, oppose abortion if the child will be born with Down syndrome. Of over half of those who identify as pro-choice, 56 percent oppose or are strongly opposed to abortion due to the expectation the child will be born with Down syndrome.

Americans seek to embrace and not erase those babies identified as having an extra chromosome.

H.R. 3755, however, overturns State laws that protect children with Down syndrome.

□ 1300

Regarding international law, the bill falsely states that: “Core human rights treaties ratified by the United States protect access to abortion.”

That is absolutely untrue. In fact, the International Covenant on Civil and Political Rights, which the United States has ratified, is concerned about unborn children being killed. It states, in Article 6, that “every human being has the inherent right to life” and that “no one shall be arbitrarily deprived of his life.”

It goes on to declare that the sentence of death—in other words, capital punishment—shall not be carried out on pregnant women. Why? The ICCPR creates an exemption from execution for pregnant women, recognizing that their unborn children have an independent claim to legal protection, as do all unborn children.

Many women have been seriously harmed by abortion. The Silent No More Awareness Campaign and many other initiatives throughout this country—and this never gets reported on by the press, never gets focused upon so people are more aware of this help out there, both within the church as well as in a nonsectarian point of view, to help women who are post-abortive and who are suffering and suffering so immensely.

A few years ago, Linda Shrewsbury, an academic African American with a degree from Harvard, who had an abortion, said at an event right here on Capitol Hill: “The lies that brought me to that day and to its sorrowful aftermath are crystal clear in my mind—falsehoods and deceptions that con-

cealed the truth about abortion. Lies planted in my thinking by clever marketing and media campaigns and endless repetition led to a tragic, irreversible decision—the death of my first child.”

She goes on to say: “I really didn’t understand back then. At age 20, I had no inkling of the mental and emotional darkness I was about to enter. I couldn’t have grasped the immense psychological toll” abortion “would take for years and into the future—unrelenting tears, guilt, shame, and depression. After spending many years in denial, I did eventually find healing.”

“When I understood and rejected distortions about fetal development, doublespeak about choice, rights, and planned and wanted children, I understood the reality and victimhood of my aborted child.”

“I understood the absence of moral basis for choosing to disentitle an innocent human being of life. When I embraced the truth, the truth set me free, and I, finally, gained inner peace.”

She goes on to say: “It is past time to lance the national wound of abortion with truth. The high culture—thought leaders, media, celebrities—that brought us abortion seem vested beyond extraction. I dreamed of the volcano of abortion truth that could erupt one day from the grassroots—women and men and their relatives witnessing to their suppressed emotion, unspoken trauma, and lived pain. With abortion denial ended, we as a society could then reconnect with reality and life.”

Mr. Speaker, the United States Supreme Court majority in 1973, in *Roe v. Wade*, wrote, in pertinent part: “We need not resolve the difficult question of when human life begins.” Sidestepping that threshold question and giving no benefit of the doubt to the child, they went on to legalize and enable abortion on demand.

For decades, right up to this very moment, abortion advocates have gone to extraordinary lengths to ignore, trivialize, and cover up the battered baby victim. But today, thanks to ultrasound, unborn babies are more visible than ever before.

When a woman is carrying a child, the first baby pictures, those that often end up on the refrigerator in celebration, are of the ultrasound pictures, not of the newborns—they follow later—but the ultrasound pictures of that little boy or that little girl or the twins.

Today, science informs us that birth is an event—albeit a very important one—but an event in the life of a child. It is not the beginning of life.

Modern medicine today also treats unborn children with disability or disease as a patient in need of diagnosis and treatment. There has been an explosion in interventions that have saved children’s lives and mitigated many, many problems that they may face when the disability, for example, was not caught early.

Unborn babies are society’s youngest patients and deserve benign, life-affirming medical interventions. All unborn babies deserve our respect and our love, not death by abortion.

Mr. GOHMERT. Mr. Speaker, I appreciate so much my friend Mr. SMITH’s dedication to this important—it is not just an issue; it is an important cause. It is so important.

We are told in law school that there can be nothing more noble than speaking up for those who are unable to defend themselves, and that is what I see when I see my friend, Mr. SMITH.

This bill we took up today, to vote on, allows abortion right up to the moment of birth. I struggle with that. I mean, I understand there are people that really believe it is not a child; it is just a mass of tissue. But when the child can be seen, as we were talking about earlier before we began the Special Order, when you look at the TV screen, you know that is your child. And it is a child. You can make out all the parts. Then it is not just a mass of tissue.

But for heaven’s sake, when it is a viable, living child, capable of living completely on that child’s own—I have seen some tough things as a felony judge, some pictures, which I wish I had never seen. But to see what is done to a living child in the name of a right is just heartbreaking.

I appreciate so much my friend’s heart on this issue.

Mr. Speaker, I yield to my good friend, if he cares to share anything else.

Mr. SMITH of New Jersey. Mr. Speaker, I thank my good friend from Texas for his leadership.

I do believe and see this—I know it is not represented on the floor of this House when it comes to our good friends and colleagues on the Democrat side, but there is a serious movement in the direction of embracing life, including the unborn child.

Like I said, some of those polls that have come out in recent days, if you just ask the question pro-choice versus pro-life, you don’t get much insight. But when you break it down under what circumstances that child’s life could be lost to abortion, huge majorities—not just for late-term abortion opposition—but huge majorities in America are clearly trending in favor of life. That is, like I mentioned, those with Down syndrome, 70 percent want that child to be given life. For those who are without Down syndrome, there are huge majorities as well.

On funding, not only the Marist poll but the other polls show as well that 6 out of 10 Americans do not want their taxpayer dollars being used for funding of abortion.

Just a few weeks ago, we passed legislation and appropriations bills, during the summer, that are pending over on the Senate side that would eviscerate the Hyde amendment, an amendment I first offered in 1983 called the Federal Employees Health Benefits

Program Abortion Ban, legislation to say that taxpayers don't want to be complicit in, as I said before, chemical poisoning, dismemberment abortions, the methods that are used routinely by the abortionists to kill that baby.

It is an assault on life. It is an assault on the weakest and the most vulnerable. We need to be caring for the weakest and most vulnerable.

You hold a child in your hand, and especially if you go to a NICU and look at these preemies—and you know that personally, Mr. GOHMERT, through your personal experience. You look at those children, and they are in desperate need of love and concern and good medical interventions that affirm their life and not take it. They are just so helpless.

You know, all the glib talk about choice—choice to do what? Kill a baby. I think we have to be so honest.

As I said with Linda's story—and there are thousands of stories like that of women who have been harmed. Often, there is relief when the abortion is over—not all the time. But it kicks in over time, either whatever method was used or just how old would that child be today.

The beauty of these outreaches to post-abortive women is that they are nonjudgmental. It is all about loving the woman and helping the woman. My wife, Marie, and I know many post-abortive women.

Alveda King, the niece of Dr. Martin Luther King, had two abortions. She is now strongly pro-life, and she made the statement in a speech where she asked how we can honor the legacy and the dream of her uncle, Martin Luther King, if we murder the babies.

But she and so many others reach out in love and compassion to those women and say: That is over. Yes, the baby is gone, but we love you, and we care for you.

I have been in this movement, the pro-life movement, for 49 years. I got involved in 1972, my first year in college. I have often thought if people just knew the truth, like Linda said in her testimony, they would run out of the abortion clinics.

Bernard Nathanson, the founder of NARAL, one of the biggest pro-abortion organizations in the country, he is one of the three who founded it, along with Lawrence Lader and Betty Friedan. Bernard Nathanson wrote in the *New England Journal of Medicine* that he came to the agonizing conclusion that he had presided over 60,000 deaths, and he became a pro-lifer. He said if wombs had windows—and that is what ultrasound is. We can now see that child moving, sucking his or her thumb. It just explodes the myth that somehow these children are not human and alive.

They have a wake and sleep cycle. They exchange the breathing that they have been doing with the amniotic fluid and building up of their lungs for air at birth. It is the magnificent continuum of life that starts at conception.

Again, as I said a moment ago, birth is an event, just an event that happens in life. We have many events. That is a big one. We all remember our birthday, but it is not the beginning of life. These children deserve respect.

Again, I thank Mr. GOHMERT for his leadership.

I say to anyone who may be listening, there is Project Rachel, within the Catholic Church; the Silence No More Awareness Campaign; and all of these efforts being made across the country and the world to reach out to post-abortive women.

Then there are the pregnancy care centers, some 3,000 of them throughout the country, that do nothing but say we love them both. We want mother and baby to be assisted, and that includes after the child is born.

I have gotten to know many of those people. They are mostly women who run them. It is all about love in action. They care so completely for those women and their families, and they stay with them. Some of the women who run them are post-abortive themselves, so they know the agony that could occur if the abortion is procured.

The pro-life movement is all about affirming life in a nonjudgmental way. Like I said, I have been in it for about half a century. We need to do more, and we need to reclaim the protection of life in our law and policy.

Mr. GOHMERT. Mr. Speaker, I appreciate so much my friend talking about loving the ones alive, the baby, the mother, because so often the focus is only on mothers that have had an abortion and good for them and not on those times when their hearts are deeply broken and that love needed to nurture and care for them.

I am just grateful that we worship a God that believes in second chances, and there is nothing that we can do to separate us from that love.

I had the privilege of hearing a lady named Ramona Trevino. I was guest-hosting somebody's radio show, and I had her on so that more people could hear her story.

□ 1315

It is amazing. She is a brilliant, brilliant person. She was top of her class in high school, and I believe it was at 15 that she became pregnant. In the Hispanic community they had looked at her as a rising star, going to be a great leader, and then she became pregnant, and there were those who encouraged her to go ahead and have an abortion. She didn't.

But she was so smart. Eventually there was an opening she saw for director of Planned Parenthood in Sherman, Texas, and so she applied. And because she was obviously so smart, she got the job. And she continued to raise her daughter.

But they were teaching the people who worked at Planned Parenthood that the most important statistic that the directors reviewed in their directors' meetings were how many young

girls are you able to get on birth control pills. That was a more important number than how many abortions you did that month.

The big money came from the abortions, of course, but the numbers that they really pushed at the directors' meetings: How young are you getting them on the pill? And how many are you getting on birth control pills?

And to do that, they were trained to tell the child: Look, your mother obviously, I am sure, will not approve of this, and you don't have to tell her. This is between you and me, and I will keep your confidence. I will let you know that I am your friend, and I will be here for you.

It was building to, as they were taught, the younger you get a girl on birth control pills, the more likely she is to forget some day and become pregnant, and that is when they made the big bucks, off the abortion. It began to bother Ramona so much that they were teaching their employees to come between somebody like her and her own daughter.

And then to really affirmatively get young girls on birth control pills because they were more likely to forget and get pregnant, encouraging them to have a really wild sexual life so that they could get pregnant became more than she could take, and she had to leave her position. It was just too much. She sounded the alarm on that for years.

But just the idea that you use dishonesty to try to make a customer—not a patient, but a customer—out of a young child and our laws all over the country say this person is not legally eligible to make a binding contract without adult advice and supervision; and yet that is where the focus is, get those girls pregnant so that we can make money on an abortion.

I yield to the gentleman from New Jersey.

Mr. SMITH of New Jersey. The parental involvement laws which would be overturned by this legislation deal with abortion, not with birth control. Just abortion. There is a bright line of demarcation between the two.

I remember meeting with a woman from Virginia who testified here on Capitol Hill, and at the time she called her group Mothers Against Minor Abortion, and the way she discovered that her daughter had an abortion was when she was hemorrhaging in her bed.

She went into the young girl's room and was shocked to find that she was, you know, very, very, very at risk, and quickly got her to the hospital. Thankfully, things turned out okay.

You know, the modest bills that would be overturned by this legislation—I mean, I am the prime sponsor of the bill here in the House to protect pain-capable children. We have had votes on that in the past. Trent Franks sponsored that in the past. That is at 20 weeks. We know beyond any reasonable doubt that at least at 20 weeks, and maybe before, an unborn child feels pain.

Dr. Sunny Anand, who is not even a pro-life pain specialist, has said that sometimes that pain can be far in excess of what a newborn or any less would feel because the pain receptors are so close to the skin, to the exposed area.

When the dismemberment process begins, the arm or the leg or some other body part is literally hacked off that child. Nobody wants to talk about that. They talk about choice. That obscures the fact that it is a violent procedure. As that is happening, the child feels pain until that child, either through shock or death, no longer feels it, then a dismemberment abortion goes on, and they don't feel it anymore.

I mean, I don't like pain. I don't think anybody in this Chamber does. That is why we take analgesics and all kinds of pain relievers, to mitigate pain when we feel it.

That child gets no such intervention, and he or she suffers an excruciatingly painful process as they are being dismembered.

We need a national debate on abortion like never before. The news media needs to cease its enabling of a narrative that is truly false that completely trivializes the unborn child, acts as if they don't exist because, obviously, they do. We need to be, I think, trying to protect the weakest and most vulnerable.

I hope we have many more debates like today. Not less, but more. We need more light and scrutiny being brought to this issue. Many women have spoken up who have been harmed. At the annual March for Life, several of the Silent No More Awareness women have spoken. And what courage that takes to stand up and tell your story, and often with family present to see this. We are really, hopefully, going to pivot.

I respect our friends on the other side of the aisle. I believe that we need to always keep it civil. But, again, those children, they are facing a death sentence.

As someone who is against capital punishment, even when there is a commission of a capital crime, capital punishment for the unborn must end.

I thank you and I yield back to my friend.

Mr. GOHMERT. I appreciate my friend so much. Thank you.

I saw a podium out on the steps. There was going to be a great celebration for women. I was a little surprised because I was thinking we weren't supposed to talk about genders like men and women, father, mother, and all that under Speaker PELOSI's rules, but anyway, apparently it is okay today.

But it is hard to think about rejoicing when we are going to keep taking the lives of the most innocent among us.

I know the big hearts of some of my friends on the other side, and knowing their big hearts it is sometimes amazing to think: You surely can't feel good about this.

In a Judiciary hearing some years back, we had a doctor testify who did late-term abortions, up until his daughter was in a car wreck, and he became so nauseous when he went to do another abortion that he couldn't do them anymore.

I have said, in my days as a judge, I have seen pictures I wish I could get out of my mind. I recall one young lady that was a victim, and she had been put in a 50-gallon barrel to try to hide her body, lime poured on, and they couldn't tell, was this limb removed while she was alive or was it from deterioration.

But this doctor said, when it comes to the late-term abortion, the child is clearly too big to remove from the womb without assistance, and he described—in much more detail than I will be able to go into—taking a clamp and feeling inside the womb until you find what you know is a limb, arm or leg, clamping on, ripping the arm or leg from the child at a time, like Mr. SMITH said, they absolutely do feel great pain, perhaps more than an adult. Ripping one. Then you continue to feel for a limb and rip off another until you have done that four times. And then, in his words, you feel for something bulbous at that point. Then you know you have the child's head. You crush the head, and then pull what is left out and dispose of it.

There are just too many big hearts on the other side of the aisle not to at some point realize that that is something we probably should not be doing. Very, very tragic.

I remember, you know, reading in the Bible as I was young and the verses from the Old Testament about parents putting their child in an idol's hand, flames leaping up so that the child could be burned to death and that they began to be desensitized to the screams of the children as they burned to death. And I thought that is inconceivable, especially that a parent could do that to a child.

But when you hear about late-term abortions and you hear some of the things that our society is doing in the name of freedom and rights—I believe in God, but hypothetically, let's say anybody that doesn't, you just believe in karma, don't believe in God. Is it conceivable that good karma could come from tearing arms and legs off an innocent child who hasn't done one single thing wrong?

Even if you don't believe in God, you can't surely think that is going to bring you a lot of good karma. And, certainly, as you celebrate the ability to continue to take innocent lives, that surely can't bring good karma.

For people who believe in God, such as me, it is easy to understand why that is described as being so very, very infuriating to a loving God.

But that was passed today. I don't think it is constitutional. I think that surely there are people on the Supreme Court, hopefully five or six anyway, that have believed for years that

should have been left to the States and the people.

And so for the Federal Government to jump in and say they are taking over, and they are knocking out all the power of the States and the people to legislate—as Mississippi or Texas or other States have—surely now that will end up being found to be unconstitutional by this body. That is the hope and prayer.

□ 1330

When it comes to being callous, sometimes this body just is. And I heard my friend, the majority leader, say that Republicans don't like voting to pay the bills, and he is not quite right on that. I know he means well and wouldn't deceive intentionally, so this isn't engaging in personalities, but he doesn't have that quite right. What Republicans don't like voting on and voting for, rather, is our great-grandchildren having to pay our bills.

And if this body next week becomes successful in adding \$3 trillion more to our national debt in the shortest amount of time in all of American history, debt that we can never pay back—well, I say never. Actually, the only way we can pay back the kind of debt that is being heaped up is if the Biden administration creates such runaway inflation that we start having the kind of inflation that Weimar Germany had where people were having to carry wheelbarrows full of cash just to buy a loaf of bread. If we had that kind of inflation then, yes, money would be so devalued that we probably could pay back our debt. But unless we go through something like that that is so economically destructive that there would be Democrats and Republicans alike wanting to have a revolution, we don't want that, we don't need that. We should never allow ourselves to start down that road of having that kind of runaway inflation. Even though it would enable us to pay back the debt, it would be at the cost of total destruction of the Nation we love.

So Republicans, we don't mind paying our own way. A good example is how many Republicans were upset back when President Bush was in his last couple years of office—and it may have been the last year we were in the majority as Republicans—but I remember we were \$160 billion approximately in the red that year, about \$106 billion or so in the red that was going to be added to the national debt.

And my Democrat friends across the aisle appropriately pointed out that we should have balanced the budget. We were within \$160 billion or so. They were right. We should have balanced the budget. Some of us were upset that we didn't. We were so close. Why not just do it and set that marker and continue down that course?

So with a promise that Democrats would be balancing the budget they won back the majority, and who would have ever dreamed that that 160 or so billion-dollar debt in 1 year, in President Obama first year, would become



1.5 to \$1.6 trillion debt in 1 year? Who would have ever believed that the people that said, oh, you had \$160 billion in debt, we are going to balance it, we are going to fix it, just put us in the majority; they got the majority, and we ran up nearly \$1.6 trillion in debt in 1 year.

And it was following that a year or two later Standard and Poor's said you can't keep running up this debt without us having to downgrade the quality of your debt, which means you will end up paying more interest, and you will end up having to pay more, a higher percentage of your overall revenue for just interest, which means less for Medicare, less for Social Security, less for those that are really in need and we need to help. And Standard and Poor's did exactly that. They downgraded our debt. And as I understand it, if any other rating service had downgraded our debt at the same time, interest rates would have shot up for the U.S. Government. But fortunately we got a break. That didn't happen. Didn't get another service. Maybe they were being dishonest in not downgrading our debt because they were right; under those Democratic majorities we were not being true to ourselves and our generation and future generations. We were creating debt that would be passed on for generations to come.

And I thought back then and said as much years ago, that would be like an adult going in to a bank and saying I need this massive loan. Well, what is it for? It is because I cannot control my spending. I just can't stop spending. I am out of control. So I need a big loan. Well, what do you have for security, for collateral? Well, I brought my children and grandchildren in here, and so I am going to make them sign off so that they will guarantee all the debt I am running up because I can't control my spending. Well, no banker in their right mind would loan money, but as the Federal Government we don't have to have a banker agree to it, we just agree to it.

And we even have people who become jubilant, wow, we were able to just add another \$3 trillion to the backs of our great-great-grandchildren some day. Why? Because we just can't control our spending. That is surely immoral. That is what Republicans don't like voting for; putting more debt on future generations' children.

And so Republicans were wrong. We should have balanced that budget when we were within \$160 billion of doing so instead of failing to do that, which enabled the Democrat majority to run up 1.5, \$1.6 trillion in 1 year; and, boy, did that blow the lid off the debt. And, yes, after that both parties were just busy raising the debt, raising the debt, all kinds of gimmicks to raise the debt, but at some point we are going to have to either say this has got to stop or we are going to finish destroying this country.

And, again, I think it is a moral issue. Are you moral enough not to make future generations pay for what

you refuse to? And I hope the answer is, no, we are not going to do that, we are going to at some point start being responsible.

But here in Washington it is a malady that seems to set in for so many, for either party that gets here and then finds, wow, we have got so much power, look what we can do. Since we know so much better than anybody else in the country, even though their IQ may be 40 points higher than our own, gee, we need to make decisions because overall we are smarter.

So it is hard not to get very cynical here in Washington. And I have used the quote before that, you know, Washington saying no matter how cynical you get, it is never enough to catch up. I think my chief of staff has caught up now. She has gotten pretty cynical.

But when you see the hundreds of billions of dollars that are at stake for pharmaceutical companies, who I have applauded the way the Trump administration got the red tape out of the way to get to a vaccine in record times, even though the current President and Vice President said as long as Trump was President they wouldn't trust it, now they are not only trusting what President Trump got done, but forcing people to have the vaccinations who have serious reservations, who are familiar with the issue of informed consent. One of the greatest developments in the history of healthcare that—maybe it has been only 100 years in the whole history of man out of the thousands of years of recorded history, maybe 100 years is all we have had—some medical historians say of living at a time when you had a better chance of getting well after seeing a doctor than of getting worse.

So you think about the thousands of years where you had a better chance of getting sicker after seeing a doctor than getting well. And we have now lived through an incredible handful of decades where not only do you have a better chance of getting well, you are likely to get well. And that continues to be the case as more and more life-saving and life-enhancing developments are made in medical care, in healthcare.

And yet the concept I am talking about that was such a great development for not only healthcare but for freedom is called informed consent.

So we are going to be filing next week a bill that addresses this: The National Informed Consent Exemption, the NICE bill, N-I-C-E, that will allow people—in fact, mandate that each individual will make their own decision about vaccination after consulting with their own physician about their own biology of their own body, what they are at risk for, which conditions are more likely to occur with a particular vaccine, which vaccine to use, whether any of them are good for that particular person to use.

It troubled me deeply when I was told, gee, if an employer does what President Biden is mandating and says

you are not going to work here unless you get a vaccination. And last I saw there were over 7,000 deaths that occurred right after getting a vaccination. CDC is careful to say, yeah, but that doesn't mean that just because they died right after the vaccination, that the vaccination caused it. Okay. But some of them surely did.

A friend in Carthage lost her husband after he got the vaccination. She said she didn't think he should, it wasn't a good idea because of his condition. He got it, died. And when they opened him up he was just full of blood clots, which was one of the risks for the vaccination he took. And she said: "He would be with me today if he had not been vaccinated."

Well, those are things a patient needs to talk about with their own physician, make those decisions, and then give informed consent to get the vaccination. That is what a free Nation should do instead of mandating things that could cause death or problems.

Thankfully, that is not the high percentage of what will happen, but it depends on your makeup what the discussion would be.

So I hope that we will get this bill passed at some point, whether it is in the next year and a half or in the session after that, but we need to get back to giving people freedom to make informed decisions rather than mandated decisions from a bloated Washington bureaucracy that doesn't know one thing about the biology of an individual patient about their risk of death.

But I started to mention, I was surprised even apparently from what I have been told that even if your employer mandates you cannot work here unless you get a vaccination, you are totally on your own. Even worker's compensation—from what I was advised, even worker's comp will not help you or your family if you become disabled from the vaccination. If you are one of the 7,000 plus that dies, nothing.

□ 1345

I would like to see it changed, but Congress has protected the pharmaceuticals, so you can't sue them.

Maybe we need to make it where any government official that mandates a vaccination that causes death or disability, maybe that government official—maybe we should open that up to tort reform that allows pursuit of that government official that forces somebody to get a vaccination. Because when somebody is forced into something and they are not allowed to have any input whatsoever, they, of course, lost their freedom. But at least give their family a chance, if you are going to force them to do something that kills them, at least allow the family a chance to recover for the loss of the person that the government official or the employer mandated take action that took their life.

Of course, we have the President—here is a story on September 21 by

Charlie Spiering—that Joe Biden boasted to the United Nations he restored the commitment to the World Health Organization. Well, for those that have not been following the news, that means that President Biden has restored the commitment of the United States to the best interests of the Chinese Communist Party because the Chinese Communist Party clearly has tremendous control over the World Health Organization.

That was one of the things President Trump found shocking, that we paid hundreds of millions of dollars to the World Health Organization and they did not act in accordance with the best interests of the United States. China paid, it seems like it was \$30 or \$40 million, and the World Health Organization helped cover up what occurred in Wuhan. They continued to lie for the Chinese Communist Party. They continued to do the bidding for the Chinese Communist Party.

This story makes clear that, actually, President Biden now has made sure that the United States is now fully supportive with and for the Chinese Communist Party along with the World Health Organization.

A great article from Justin Haskins with *The Federalist* discusses Joe Biden's vaccine mandate as blatantly unconstitutional, and then the article says it is flatly unconstitutional. It truly is, but we have come to a place in American history, which I guess these things have happened before, there have been ridiculously inane decisions about the Supreme Court in our history.

Well, until the Supreme Court acts, this blatantly unconstitutional action by the Federal Government is allowed to continue to keep taking place. So we will see what happens in the future.

But we keep hearing from the other side about how uncaring and hard-hearted Republicans are because of our position about our borders. Well, it wasn't that important to have secure borders before we started providing welfare benefits to American citizens. Once that started occurring, as Milton Friedman pointed out, you must have borders if you are going to have a welfare state; otherwise, it will be a very short time before your country will cease to exist.

I understand the strategy. The more millions of people we get into this country, especially those that are easily duped and don't speak English, they are seen as new voters for the Democratic Party. I get that. But for Heaven's sake, have a little heart about and for the people that are being lured into this country. The 15,000, 16,000 Haitians that just came in recently weren't coming from Haiti. They were Haitians originally, but they had gone to South America—most of them, some Central America. When they got word that the Biden administration was slinging open the border, letting anybody come in—terrorists, give us your tired, your poor. Terrorists that want to destroy

our country, come on in. This administration is going to help.

Heck, we will even load up planes in Afghanistan and bring people that we are now hearing are likely terrorists. We will bring them on in because they may vote Democratic at some point.

But a caring person would understand these people left Haiti because they couldn't live under the conditions in Haiti. They went seeking a better life and found it in one country or another until they got word that the border is open: You can come into America because President Joe Biden is not going to send us back.

Then for 1,400 of those 15,000 to 16,000 Haitians, they were not sent back where they came from seeking a better life. They were sent back to Haiti where they hadn't lived in years. That is why you see some of them crying, weeping on television: How could they do this? They brought me back where I couldn't live. I couldn't make a living. I couldn't live. We left here. We were doing better. And then we come to the U.S. because you lured us up there, and now you send us back to the place where we couldn't make a living.

I mean, what kind of country does that? What kind of political leaders do that?

Well, the answer is this administration. If we had enough compassion for the people of Mexico, Central America, South America, if we had the right kind of compassion, truly caring about the people of those countries, what we would do is secure the border.

The hell going on in Mexico because of the corruption from the drug cartels doesn't need to be happening. Why is it happening? Because the United States of America, the home of the brave, the land of the free, we are sending tens of billions of dollars to the drug cartels in Mexico.

They are getting money for bringing people into the U.S. illegally from the people they are bringing. But they don't have enough, most of them don't have the money to pay the whole debt, so they are told you can work it off, because when you get where we are sending you, and we are going to get the U.S. Government to pay to send you where we, the drug cartels, need you to work.

As we have been told in testimony here on the Hill before, there are drug cartels in every city in America. The U.S. Government, as the border patrolmen told me down there, they call us their logistics. The drug cartels get them across the border, and then we ship them wherever the drug cartels want them to go.

This has to stop. This is an existential threat to America. As some friends from around the globe have said, we get upset with the United States but you have to understand, we see your light, light of freedom, we see your light going out. You have to understand, when the light of freedom goes out in America, it will go out around the world.

Reagan said no generation that lost freedom got it back in the same generation. I am telling you, if we are not more careful in this body, that light will be extinguished, and I don't think it will ever come back until the end of time.

We have to be careful what we are doing. We have tremendous responsibility. To whom much is given, much is required. We have an awesome obligation, and we are not filling it when we run up a \$3 trillion debt, nor when we legislate to kill the most innocent among us.

Mr. Speaker, I yield back the balance of my time.

#### HELPING WORKING POOR

The SPEAKER pro tempore. Under the Speaker's announced policy of January 4, 2021, the Chair recognizes the gentleman from Arizona (Mr. SCHWEIKERT) for 30 minutes.

Mr. SCHWEIKERT. Mr. Speaker, to my friend LOUIE, it is always interesting listening to you. People know how freaky smart you are.

Mr. Speaker, we are going to try to do something for the next half an hour, and I don't want to sound like a jerk when I do some of it. Some of it I am sincerely trying to find a way to talk about something that is of intense concern to me. But it is also going to be a pretty direct assault on a lot of the left's policy right now. I am hoping there will be some hearts that will listen to the concern and to the solutions.

Mr. Speaker, if I came to you right now and said: What is the single most economically violent thing you could do to someone that is in the working poor, those brothers and sisters who didn't graduate high school, who basically the economic value they sell is their labor, their work talent? We are talking 25 million to 40 million Americans who functionally are in that category. They are hardworking, lower middle class.

What we have allowed to happen so far this year, the brutality to their family's ability to survive, to economically exist—I want to walk through some of the math, and then I want to talk about why the left believes a series of transfer payments is the way to make their life better, unlike when we actually had the data from 2017, 2018, when we saw the working poor get dramatically less poor because their labor became more valuable.

What is the number one thing you do, the first thing you do, to crush people in that lower end of the scale who are out there busting their backside trying to survive? You open up the border.

We have really good data here, and we are going to talk about a couple of our slides, but there are lots of studies. The amusing thing, some of the older studies were actually promoted by liberal think tanks that actually thought that the exploitation of cheap labor coming across the border was actually a thing to crush the poor in the United States.

We all forget, a decade, decade-and-a-half ago, it was the left who believed in securing the border to protect working men and women, and the right was the one that was accused of saying we want cheap labor for our business colleagues. It is amazing how the ideology has flipped.

But we actually have a couple of studies that basically come back—and these are tough because we are going to talk some pretty aggressive math. If you take a family that you and I would designate as the working poor today and you flood society with 1 million, 2 million in, functionally, a 12-month, 24-month period of time, you have just lowered their future earning power.

In one of the studies, it is about 6.2 percent, which is a stunning amount to think that, at the end of a decade, their wages are going to be over 6 percent less. They didn't participate in the growth of the value of their labor going up.

I will argue that we are missing one of the most critical parts of discussing what is happening in the southern border of our country. And being from Arizona, we are seeing it.

□ 1400

If we love and care about the people that struggle in our country, then why would we allow a policy—and I hear on occasion, well, we are being compassionate. You damn well are not being compassionate to the people that are already here.

We can demonstrate in study after study—and these aren't conservative studies; they are academic. Some of them when we went back, we went back 10 to 15 years and found some that talked about that they were going after President Bush's policy of immigration reform and what it was going to do to working men and women, particularly on, we will call it, the working poor categories.

It just breaks my heart that, on occasion, we are going to have the immigration conversation of the chaos that is going on at the border. Could we actually demonstrate some love and caring for those working families, for those working individuals on the lower income end?

Mr. Speaker, this isn't comfortable coming from someone that looks like me from Scottsdale. But if you actually see the stratification on the numbers, you take urban African Americans and we are kicking their head in economically, more than just over the next year, but over the next decade.

I have a fixation that economic expansion, you know, economic growth, is moral. Particularly what we saw in 2018 and 2019, before COVID, we saw this amazing thing where income inequality was shrinking at the fastest ever in modern economic history, that the working poor were getting dramatically less poor. The rich were getting richer, but not as fast as the poor were getting less poor. That has to be the goal.

What is the other thing you also do to absolutely crush the working poor? You open up the borders and devalue their labor, and then you allow an inflationary cycle right now.

I have been there. I mean, God knows, I lived in a little, tiny room behind a garage for years just trying to economically survive. I got very lucky.

But to someone that that is their life, when the rent goes up, when fuel goes up, when food goes up, all these things where, for someone that is in the working poor, the percentage of their wages, their income, maybe even their transfer payments gets chewed up by inflation. And at the same time, you are lowering the value of their wages.

Why would we do this? Do my brothers and sisters on the left actually have any labor economists who are willing to tell the truth, that at the end of this year, the very population that both sides here claim we care about will be poorer? Their lives will be more miserable.

We are better than this. I am frustrated because I understand the left's solution is, well, we are going to stack them up with transfer payments. Okay. We are going to talk about how that gives you a nice pop.

By the end of the decade, you could have gone with the conservative model, which is economic vitality, growth, make the wages more valuable, those things, a supply-side model where things get cheaper because you have incentivized productivity and production, those things.

Remember the rule of thumb. What are the two ways you pay someone more? Inflation, which means you raise their wages, but they didn't get anything more for it because it is just chasing the costs, or productivity where you are able to pay people more because we built a tax and regulatory code that encouraged investment in pieces of equipment, in training that made that worker more valuable, and, therefore, they get paid more without setting off inflation. We were living that just about a year and a half ago. That is what we were seeing in 2018 to 2019.

Look, there is another study out there that just talks about the decrease in wages that is now happening. When you start to increase the labor supply—and believe it or not, this one shows 10 percent. But remember, it is 10 percent within that subcategory.

If the border crossing numbers stay where they are, that is what we are going to hit for the next decade. That study says over 6 percent, and this one says almost immediately we are going to take the working poor and not see their wages go up. This study says they are going to go down 3 percent almost immediately because that is what happens when you raise the labor pool of people with similar skill sets. It is a type of cruelty.

If I came to you and said that we both care about the working middle class, the hardworking middle class,

and we both particularly care about the working poor in the country because we believe that by making their lives more economically viable and prosperous, our society, our country, gets better, healthier, and we don't tear at each other.

The left talks a lot about income inequality, and I actually agree with that. I believe the stratification. But you don't do it by kicking one quartile in the head. You do it by lifting up the mass and making their labor much more valuable.

But what happens when we start to actually say the way the left is going to do it is, we are going to do trillions of dollars of transfer payments. We will see childhood poverty. Families with children who are in poverty is unacceptable where it is at. There is a handful of things that we would all agree to do to help that population.

But are you really going to do transfer payments for folks with kids up into the \$400,000-a-year income? Because that is what the legislation says. Is that really helping children that are growing up in poverty households?

I think one of the numbers is it caps out, for a couple with kids, mid-\$400s. That is really the left's definition of struggling families? Or is it actually a level of, sort of, dark political gamesmanship, saying: We are not only going to take care of the population that we agree we must find a way to make them more prosperous, but we are going to take the rest, the most of our society, and we are going to make sure they are addicted to a monthly transfer payment because they will be beholden to one political party.

If that is so, be honest about it. It is brilliant politics. It is devastatingly horrible economics.

As you can start to see with this chart I am holding, by the end of the decade, we are going to be much poorer as a country, much poorer as a society. The size of our economy will actually be smaller because of the way we are doing this.

I am going to have to do this on the floor next week because I wanted to make sure I got my math absolutely correct because it is a hard dataset. By the end of the decade, you can do the Democrat's transfer payment model or our model to help those who are most in need, and then an aggressive economic growth model. You would have a dramatically bigger, healthier economy in the Republican model. Wages would be at a point where you would actually have almost the same poverty statistic.

The difference is the left's version of a transfer payment model to help the poor, and now the craziness of taking it up to people making \$400,000-some on that child credit. You create a world, at the end of the decade, where these populations, their wages are worth less, their work opportunities are worth less, their ability to save for retirement is worth less. Their future prospects are basically beholden to the Democrats sending more money.

With the Republican model, you don't get the same political credit, and you don't get the same political loyalty to your party, but they have an economic future. Their savings, their future wages, their ability to save for retirement are dramatically different.

Yes, those people are free to actually go wherever they want, ideologically. But it is a better economic model for our society. We are seeing datasets after datasets. What the Democrats are about to do in their \$3.5 trillion—no matter where it ultimately goes, they are going to make our society poorer. They are going to make those working people poorer.

The Tax Foundation just published, and I have only done the first skim of it, but they are looking at a horizon. They are saying, look, revenues are only coming in at a fraction of what the Democrats are scoring over time because of the shrinkage of the size of the economy.

They may get a trillion dollars of new revenues, but long-run GDP, wages, jobs are all smaller, and fairly dramatically smaller over time. There will be 300,000 of our brothers and sisters who no longer have job prospects. The size of the economy will be smaller.

It is sort of a dark way for those who care a lot about prosperity in our society. How can you engage in a political plan, saying, well, we are going to do these types of redesigning the economy, redesigning our society, basically becoming a European transfer income socialist society, which that is the model, without admitting, oh, by the way, at the end of the decade, if you were to take away the transfer payments, the society is much poorer. With the transfer payments, the future of our society, the future of these workers, the future of the working poor, their prospects are much, much less.

This is a pretty dark thing I believe the Democrats are doing. I think a lot of them have never had an economist sit down and walk them through the math, saying: You are going to get a nice little sugar high for a while, but by the end of the decade, you are going to have a fairly stagnant and almost no economic growth. And people are going to be getting poorer every single day.

I refuse to be like some of my colleagues out there who believe that is actually a mission of the Democrats, to make more of the society addicted to their largesse. I believe that we both love and care about people, and we want them to prosper. I just need someone to buy my brothers and sisters on the left a calculator so they can see what they are about to do.

This isn't all of them. We can actually keep finding more. This is just the list we have as of right now of all the tax hikes. There seems to be this scam going around here of, well, we are only going to tax the rich.

Now, we all know that is a fraud, and I am going to show you how. If they

really wanted to transfer wealth from very wealthy people, it is not about taxing them because when you do that, you distort economic decisions. Stop subsidizing them.

You do understand—I actually came to the Ways and Means Committee and presented it multiple times here on the floor—we can come up with, in 10 years, \$1.4 trillion that the Democrats subsidized the rich. So it is this amazing economic fraud.

We are going to tax them this much money, and then they are going to turn around and subsidize those people, which is brilliant politically. You show up and lobby me, maybe write me campaign checks and those things on the tax side so I don't make that too burdensome. Then you come and lobby me and campaign and help me and write me checks, and I hand you subsidies.

But when you start to read through all the tax hikes that are part of the Democrat legislation, it is not just the line saying we are going to raise taxes on really rich people. It is dozens and dozens and dozens and dozens of different tax hikes, which will kick the middle class in the head because you just raised their costs. You have just shot up their inflation, and you have just made it expensive for them to live.

But for a lot of folks here, they don't understand the basics of the number of excise taxes. I know the people who are probably watching this or listening, you are freaky smart. You understand the concept of a value-added tax like it is in Europe and parts of Asia, where, during the production cycle, you keep adding. That is essentially what an excise tax is.

If you think about it, we tax it at the manufacturer; we tax it at the distributor; we tax again at the retailer. But there seems to be a misunderstanding that what you are doing to the base affects many products and commodities, and in that list are a number of excise taxes. The chart here is just trying to understand what you are doing to the prices of products.

□ 1415

Then they have the gall to come behind these microphones and say: We are not going to raise the taxes on poor people. We are not going to raise taxes on the middle class.

Come on. Buy a calculator. At least have some level of intellectual honesty. Say you believe a society that is addicted to transfer payments and entitlements is the Democrat vision and the right's vision is economic growth and prosperity. I am willing to have that debate.

I believe the math on my calculator—for my 5-year-old daughter—that a model with a society from top to bottom is wealthier, more prosperous, is so much more egalitarian and so much more elegant, instead of a command and control where the party in power can dial up and dial down whom they want to punish and whom they want to reward according to how they

participated for that party in the last election. That is how cynical this place has now become.

So let's actually walk through a little bit of my argument that if the Democrats really gave a damn about getting revenues, then they would stop subsidizing the rich. Because you understand, Mr. Speaker, when you go and raise the taxes on capital gains and say: Oh, rich people are going to pay those, then you have just distorted their investments in things that make us more productive as a society and as an economy.

Remember that earlier part of the conversation, productivity is what makes it so we can pay people more.

But here is how dark the Democrats' bill is. Let's just use this as an example, Mr. Speaker. You have a family making \$800,000 a year.

Are they rich?

I would say so. That is in the very top strata of income across this country. The Democrats' bill, as it was given to the Ways and Means Committee last week, when you add up all the tax credits and subsidies, Mr. Speaker, they intend to give that \$800,000-a-year-family over \$118,000 in credits. Not taxes—credits. Direct cash.

Then they will come behind the microphone and say: But we are going to tax rich people to make them pay to help out society.

I am willing to have that. I am someone who does believe in a progressive tax system. But it is pretty perverse when you say, I am going to raise the taxes and then not mention that you are turning around, Mr. Speaker, and handing over \$100,000 to that very family that you are trying to claim you raised their taxes. Yes, you raised it, and then you gave them back more money after you raised it. This is the perversity that is going on here. It is never getting any press because it would require a calculator, and reporters don't own calculators.

But there are land mines that are getting no press because, Mr. Speaker, you handed us thousands of pages of tax-and-spend policy in the Ways and Means Committee. The day before we were supposed to debate it, we offered 57 amendments—many of them were actually derivatives of Democratic amendments—but not one was accepted because the Ways and Means Committee did not write this legislation. It came from the Speaker's Office.

Now, every single day we are discovering little land mines that are hidden in here.

So think about this: My State does not recognize public employee unions. I am from Arizona. So my school district, my county, my city, and my State offer really good benefits: here is your pension, here is your health, here is your family medical leave. To be able to continue to offer that family medical leave in the State of Arizona, they have to recognize unions now. That is hidden. It was brilliantly written. A nonlawyer found it because the

staff was just trying to deal with the perversities of what was going on in the way some of the tax definitions were written and where it seems to help certain groups and crush other groups.

Think about this: If you want your electric vehicle, Mr. Speaker—so you are that \$800,000 person and you are getting your electric vehicle—if you want the full tax credit, the car had to be made in a unionized plant.

Mr. Speaker, can you tell me how many minutes are remaining?

The SPEAKER pro tempore. The gentleman from Arizona has 7 minutes remaining.

Mr. SCHWEIKERT. Forgive me. I have had a lot of coffee today. I am a nondrinking Catholic, but I believe if you are not walking around with expresso, you are just not trying.

Mr. Speaker, I am dead serious about this. It is more than just the debate you and I are willing to have on raising taxes over here and spending it over there, becoming more egalitarian in a society. This bill is truly designed to redesign society.

So, Mr. Speaker, now you have the forced unionization of all government workers up and down the tree for the majority of States that are right-to-work States. Okay. Fine.

Shouldn't you actually have told someone that instead of trying to hide it in the legislation?

We keep coming up with more and more of these little backdoor things.

So, Mr. Speaker, if you have union representation, you are going to get to deduct your union fee. But if I am a nonunion worker, I am in a State that provides either optionality or they don't recognize it in my State, but I do have some group over here who does collective bargaining or negotiations, if I'm a union member I get to deduct my fees. So we are using, once again, spending through the Tax Code to backdoor subsidized unions because unions write huge checks and donate stunning amounts of money to Democrat campaigns. But if, on the other side of the equation, I am not one of those union members, I don't get to deduct.

Come on. Is this really where the left has gone that every policy, every design, and every little land mine that can be hidden in the language of the few thousand-page bill isn't necessarily to make the working poor less poor and isn't necessarily designed to make our society grow and provide opportunity? It is designed for power.

We saw a number of things in that piece of legislation in the Ways and Means Committee when we started to lay it out. I have to admire the audacity of the left and what they are trying to do right now. I just have to genuflect at one level and say that the gall is so over the top it belongs almost being in a movie if someone actually cared about math.

But the forced unionization, the level of transfer payments, and the level of

basically making the majority of society, people up to—what was our math—\$440,000 a year getting functionally child support payments and child tax credits—direct payments for them, then out the other side of the mouth saying: We are helping the working poor.

No, you are not, Mr. Speaker.

If you and I were helping the working poor, we would have done something dramatically different on the saver's credit and how we do earned income tax credits, those things, and we would actually have an honest conversation that the miracle of growth we had in 2018 and 2019 was one of the most egalitarian and successful in closing income inequality and in closing nutrition stress.

Mr. Speaker, when you saw that nutrition stress shrank to its lowest level and poverty rates shrank to their lowest level—there is a model out there—put it under a Democrat label. I don't care.

I know it irks people on the left to say: Well, regulatory and tax reform created a vibrant economy at a time when our demographics are moving against us.

What makes some of those numbers so difficult—and everyone here knows it, and no one will talk about it—one of the greatest headwinds we have as a society is, we are getting old very fast. Our demographics are really, really tough.

The only way we are ever going to make our debt obligations in a couple decades and the only way my 5-year-old is going to be able to live as well as I did, is not functionally turning the economy into a European-style transfer entitlement economy which is what the legislation does.

It has got to be an economic velocity of takeoff, of adopting a disruptive technology, and of providing where investments are in productivity, so everyone is able to be paid more, make the wages, and make their labors much more valuable. We actually know how to do it now.

For my last couple of moments here, I can't count the number of times I will see Democrats get up and spout about supply-side economics and then you talk to them, Mr. Speaker, and they have no idea what supply-side economics is. You are living in it, Mr. Speaker.

When you see the shortages, when you see the ability to have supply chains work, and when you see the cost of everything going up around it, Mr. Speaker, then you have just seen the Democrat version of subsidized Keynesian, put money into consumption but don't build and put incentives into the production, because the production creates the wealth, creates the jobs, creates the productivity, and keeps the prices low. So even if you subsidize me, if I had to pay higher prices, then I didn't live any better.

The fact of the matter is, you are living the ultimate experience right now, Mr. Speaker, and I truly wish the 1970s could have their economics back.

Mr. Speaker, I yield back the balance of my time.

## ADJOURNMENT

The SPEAKER pro tempore. Pursuant to section 11(b) of House Resolution 188, the House stands adjourned until 11 a.m. on Sunday, September 26, 2021.

Thereupon (at 2 o'clock and 25 minutes p.m.), under its previous order, the House adjourned until Sunday, September 26, 2021, at 11 a.m.

## EXECUTIVE COMMUNICATIONS, ETC.

Under clause 2 of rule XIV, executive communications were taken from the Speaker's table and referred as follows:

EC-2220. A letter from the Secretary, Department of Defense, transmitting a letter on the approved retirement of Lieutenant General Ricky L. Waddell, Jr., United States Army Reserve, and his advancement to the grade of lieutenant general on the retired list, pursuant to 10 U.S.C. 1370(c)(1); Public Law 96-513, Sec. 112 (as amended by Public Law 104-106, Sec. 502(b)); (110 Stat. 293); to the Committee on Armed Services.

EC-2221. A letter from the Secretary, Department of Defense, transmitting a letter on the approved retirement of Lieutenant General Robert F. Hedelund, United States Marine Corps, and his advancement to the grade of lieutenant general on the retired list, pursuant to 10 U.S.C. 1370(c)(1); Public Law 96-513, Sec. 112 (as amended by Public Law 104-106, Sec. 502(b)); (110 Stat. 293); to the Committee on Armed Services.

EC-2222. A letter from the Secretary, Department of Defense, transmitting a letter on the approved retirement of General Gary L. Thomas, United States Marine Corps, and his advancement to the grade of general on the retired list, pursuant to 10 U.S.C. 1370(c)(1); Public Law 96-513, Sec. 112 (as amended by Public Law 104-106, Sec. 502(b)); (110 Stat. 293); to the Committee on Armed Services.

EC-2223. A letter from the Acting Assistant Secretary, Department of Defense, transmitting an additional legislative proposal to an earlier transmittal titled the "National Defense Authorization Act for Fiscal Year 2022"; to the Committee on Armed Services.

## TIME LIMITATION OF REFERRED BILL

Pursuant to clause 2 of rule XII, the following action was taken by the Speaker:

H.R. 4374. Referral to the Committee on Energy and Commerce extended for a period ending not later than October 28, 2021.

## PUBLIC BILLS AND RESOLUTIONS

Under clause 2 of rule XII, public bills and resolutions of the following titles were introduced and severally referred, as follows:

By Mr. BACON:

H.R. 5358. A bill to direct the Secretary of Homeland Security to establish an election research program to test the security of election systems, and for other purposes; to the Committee on House Administration, and in addition to the Committee on Homeland Security, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. ARMSTRONG (for himself and Mr. PAPPAS):

H.R. 5359. A bill to establish the Rural Export Center, and for other purposes; to the Committee on Foreign Affairs.

By Mr. BIGGS (for himself, Mr. MASSIE, Mr. ROSENDALE, Mr. DUNCAN, Mr. HICE of Georgia, Mr. GOOD of Virginia, Mr. GOHMERT, Mr. BROOKS, Mr. TAYLOR, Mr. SMITH of Missouri, Mr. WEBER of Texas, Mr. CLOUD, Mr. POSEY, Mrs. LESKO, Mr. MCCLINTOCK, Mr. BISHOP of North Carolina, Mr. ROY, Mr. HARRIS, Mrs. MILLER of Illinois, Mr. MOONEY, Mr. NORMAN, and Mrs. BOEBERT):

H.R. 5360. A bill to nullify certain executive orders regarding COVID-19 vaccine mandates and to prohibit the Secretary of Labor from issuing a rule mandating vaccination against COVID-19, and for other purposes; to the Committee on Oversight and Reform, and in addition to the Committees on Education and Labor, Energy and Commerce, and Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Ms. DELAULO (for herself, Mr. AUCHINCLOSS, Ms. BONAMICI, Mr. LOWENTHAL, Mr. POCAN, Ms. MCCOLLUM, Ms. NORTON, Mr. MCGOVERN, Mr. GARCIA of Illinois, Mr. SAN NICOLAS, Mr. EVANS, Ms. GARCIA of Texas, Mr. COOPER, Ms. ROSS, Mr. BLUMENAUER, Ms. JAYAPAL, Ms. TITUS, Mr. GREEN of Texas, and Ms. SCHAKOWSKY):

H.R. 5361. A bill to require the Secretary of Housing and Urban Development to establish a national evictions database, and for other purposes; to the Committee on Financial Services.

By Mr. GOLDEN:

H.R. 5362. A bill to amend the Ethics in Government Act of 1978 to require senior Government officials and their family members to divest foreign financial interests, and for other purposes; to the Committee on Oversight and Reform, and in addition to the Committee on House Administration, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mrs. HINSON:

H.R. 5363. A bill to direct the Bureau of Labor Statistics, Government Accountability Office, and Small Business Administration to conduct a joint study on pandemic unemployment programs, and for other purposes; to the Committee on Ways and Means.

By Mr. KELLY of Pennsylvania:

H.R. 5364. A bill to amend title 5, United States Code, to lower the standard for removing employees who disclose tax return information without authorization, and for other purposes; to the Committee on Ways and Means, and in addition to the Committee on Oversight and Reform, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. KIND (for himself, Ms. DEGETTE, Mrs. WALORSKI, and Mr. BACON):

H.R. 5365. A bill to amend title XVIII of the Social Security Act to expand Medicare Rural Health Clinic Services and Federally Qualified Health Center Services to include physical therapy services; to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Ms. KUSTER:

H.R. 5366. A bill to amend the Internal Revenue Code of 1986 to provide that certain contributions by government entities are treated as contributions to capital; to the Committee on Ways and Means.

By Mr. LAMB:

H.R. 5367. A bill to direct the Secretary of Energy to establish a program to award grants for qualifying advanced energy projects, and for other purposes; to the Committee on Energy and Commerce.

By Mr. LAMB:

H.R. 5368. A bill to direct the Secretary of Energy to establish a program to demonstrate the technical and economic viability of carrying out clean energy projects on current and former mine land, and for other purposes; to the Committee on Science, Space, and Technology.

By Mr. LAMB:

H.R. 5369. A bill to amend the Internal Revenue Code of 1986 to enhance the qualifying advanced energy project credit; to the Committee on Ways and Means.

By Mr. MCGOVERN (for himself, Mrs. WALORSKI, Ms. PINGREE, and Mr. EVANS):

H.R. 5370. A bill to amend title XVIII of the Social Security Act to require the Secretary of Health and Human Services to conduct a demonstration program to assess the effects of a hospital providing to qualified individuals medically tailored home-delivered meals, and for other purposes; to the Committee on Ways and Means, and in addition to the Committee on Rules, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Mr. MORELLE (for himself and Mr. SMITH of Nebraska):

H.R. 5371. A bill to amend the Internal Revenue Code of 1986 to permanently extend the allowance for depreciation, amortization, or depletion for purposes of determining the income limitation on the deduction for business interest; to the Committee on Ways and Means.

By Mr. PERRY (for himself, Mr. ROY, Mr. GOOD of Virginia, and Mr. DUNCAN):

H.R. 5372. A bill to prohibit the Department of Health and Human Services from using any Federal funds to create or maintain an office to address climate and health equity, or for any climate change program, project, or activity; to the Committee on Energy and Commerce.

By Mr. SCHIFF (for himself, Mr. LIEU, and Mr. SHERMAN):

H.R. 5373. A bill to allow mandatory nighttime curfews at certain airports, and for other purposes; to the Committee on Transportation and Infrastructure.

By Mrs. BOEBERT (for herself and Mr. NORMAN):

H. Res. 679. A resolution impeaching Kamala Devi Harris, Vice President of the United States for the high crimes and misdemeanors of betrayal of the public trust; to the Committee on the Judiciary.

By Mrs. BOEBERT (for herself, Mr. BIGGS, Mr. DUNCAN, Mr. NORMAN, Mr. GOHMERT, and Mr. HICE of Georgia):

H. Res. 680. A resolution impeaching Joseph Robinette Biden Jr., President of the United States for the high crimes and misdemeanors of betrayal of the public trust; to the Committee on the Judiciary.

By Mr. COHEN (for himself, Mr. WILSON of South Carolina, Mr. FITZPATRICK, Mr. HUDSON, and Mr. CLEAVER):

H. Res. 681. A resolution recognizing the ongoing crackdown on freedom of expression and human rights in Belarus a year after the

2020 election, calling for an end to Alyaksandr Lukashenka's continued campaign of repression against peaceful protesters, journalists, cultural workers, human rights defenders, trade union activists, political activists, and government critics, and expressing solidarity with the Belarusian people; to the Committee on Foreign Affairs.

By Mr. KIND (for himself, Mr. BACON, Mr. CONNOLLY, Mr. ROUZER, Mr. COOPER, Mrs. CAROLYN B. MALONEY of New York, Mr. KILMER, Mr. ADERHOLT, Mr. WALTZ, Mr. RICE of South Carolina, Mr. FLEISCHMANN, Mr. COURTNEY, Mr. DIAZ-BALART, Mr. CALVERT, Mr. BILIRAKIS, Mr. MAST, Mr. CICILLINE, Mr. SMITH of Missouri, Mr. COLE, Mr. JACKSON, Ms. LOIS FRANKEL of Florida, Mr. SUOZZI, Ms. WILSON of Florida, and Ms. SPEIER):

H. Res. 682. A resolution recognizing the self-determination of Gibraltar to determine its status as a British Overseas Territory; to the Committee on Foreign Affairs.

## CONSTITUTIONAL AUTHORITY STATEMENT

Pursuant to clause 7 of rule XII of the Rules of the House of Representatives, the following statements are submitted regarding the specific powers granted to Congress in the Constitution to enact the accompanying bill or joint resolution.

By Mr. BACON:

H.R. 5358.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8

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By Mr. ARMSTRONG:

H.R. 5359.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8, clause 3

By Mr. BIGGS:

H.R. 5360.

Congress has the power to enact this legislation pursuant to the following:

Article 1

By Ms. DELAULO:

H.R. 5361.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8, clause 3 provides Congress with the power to "regulate commerce with foreign nations, and among the several states, and with the Indian tribes."

By Mr. GOLDEN:

H.R. 5362.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8

By Mrs. HINSON:

H.R. 5363.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8, Clause 1

Article I, Section 8, Clause 18

By Mr. KELLY of Pennsylvania:

H.R. 5364.

Congress has the power to enact this legislation pursuant to the following:

Article 1 Section 8 of the United States Constitution

By Mr. KIND:

H.R. 5365.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8

By Ms. KUSTER:

H.R. 5366.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8, Clause 1 of the United States Constitution, the Taxing and Spending Clause: "The Congress shall have Power



To lay and collect Taxes, Duties, Imposts and Excises, to pay the Debts and provide for the common Defense and general Welfare of the United States . . .”

By Mr. LAMB:

H.R. 5367.

Congress has the power to enact this legislation pursuant to the following:

Article 1 Section 8

By Mr. LAMB:

H.R. 5368.

Congress has the power to enact this legislation pursuant to the following:

Article 1 Section 8

By Mr. LAMB:

H.R. 5369.

Congress has the power to enact this legislation pursuant to the following:

Article 1 Section 8

By Mr. McGOVERN:

H.R. 5370.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8, Clause 1 of the United States Constitution.

By Mr. MORELLE:

H.R. 5371.

Congress has the power to enact this legislation pursuant to the following:

This bill is enacted pursuant to the power granted to Congress under Article 1, Section 8, Clause 1 of the United States Constitution.

By Mr. PERRY:

H.R. 5372.

Congress has the power to enact this legislation pursuant to the following:

Article I, Section 8

By Mr. SCHIFF:

H.R. 5373.

Congress has the power to enact this legislation pursuant to the following:

The Valley-Wide Noise Relief Act is constitutional under Article I, Section 8, Clause 18, the Necessary and Proper Clause. The bill is constitutionally authorized under the Necessary and Proper Clause, which supports the expansion of congressional authority beyond the explicit authorities that are directly discernible from the text.

#### ADDITIONAL SPONSORS

Under clause 7 of rule XII, sponsors were added to public bills and resolutions, as follows:

H.R. 79: Ms. KELLY of Illinois.

H.R. 151: Mr. AGUILAR, Mr. SARBANES, and Mr. MALINOWSKI.

H.R. 228: Mr. MCCARTHY and Mr. VARGAS.

H.R. 263: Mr. SARBANES, Ms. DELAULO, and Mr. BERA.

H.R. 310: Mr. KAHELE.

H.R. 477: Ms. DELAULO.

H.R. 504: Mrs. LESKO.

H.R. 801: Mr. AGUILAR.

H.R. 815: Miss RICE of New York and Ms. DAVIDS of Kansas.

H.R. 915: Mr. WOMACK.

H.R. 1012: Mr. MCNERNEY, Mr. LEVIN of Michigan, Mr. HIMES, Mr. RUIZ, Mr. NEAL, Mr. COURTNEY, Mr. MOULTON, Ms. DEGETTE, Mr. SCHIFF, Mr. THOMPSON of California, Mr. SIRES, Ms. PINGREE, Ms. DELBENE, Mr. CÁRDENAS, Mr. GOTTHEIMER, Mr. HOYER, Mr. MALINOWSKI, Mr. FITZGERALD, Mr. PRICE of North Carolina, and Mr. CASTRO of Texas.

H.R. 1066: Mr. AGUILAR and Mr. KAHELE.

H.R. 1080: Mr. TIMMONS.

H.R. 1226: Ms. HOULAHAN.

H.R. 1348: Ms. CLARK of Massachusetts.

H.R. 1384: Mr. ALLRED and Mr. COSTA.

H.R. 1559: Mr. NEWHOUSE.

H.R. 1569: Ms. STANSBURY and Ms. SCANLON.

H.R. 1577: Mr. LEVIN of Michigan.

H.R. 1593: Mr. CAWTHORN, Mrs. FISCHBACH, and Mrs. MCBATH.

H.R. 1611: Ms. DEGETTE.

H.R. 1722: Mr. SUOZZI.

H.R. 1745: Mr. BENTZ and Mr. HUDSON.

H.R. 1813: Mr. O'HALLERAN.

H.R. 1909: Ms. PINGREE.

H.R. 1977: Mrs. MILLER-MEEKS.

H.R. 1978: Mr. HORSFORD and Mr. LATURNER.

H.R. 2076: Mr. BILIRAKIS and Mr. JORDAN.

H.R. 2079: Ms. MENG.

H.R. 2116: Mr. DESAULNIER and Ms. ESCOBAR.

H.R. 2127: Mrs. HINSON.

H.R. 2143: Mr. HIMES and Mr. JOYCE of Ohio.

H.R. 2144: Ms. WILD.

H.R. 2314: Mr. NORMAN and Mr. C. SCOTT FRANKLIN of Florida.

H.R. 2366: Mr. BACON.

H.R. 2400: Ms. JACOBS of California.

H.R. 2447: Mr. TONY GONZALES of Texas.

H.R. 2455: Mrs. MCBATH and Mr. CÁRDENAS.

H.R. 2509: Mr. BOST.

H.R. 2517: Ms. LOIS FRANKEL of Florida, Mr. DEUTCH, Ms. WILSON of Florida, and Mr. NEGUSE.

H.R. 2519: Mr. CARBAJAL.

H.R. 2583: Mr. DELGADO.

H.R. 2594: Mr. POSEY.

H.R. 2616: Mr. LAMB.

H.R. 2654: Mr. THOMPSON of Mississippi.

H.R. 2748: Mr. BILIRAKIS.

H.R. 2811: Mr. CRIST.

H.R. 2828: Mr. ROSE.

H.R. 2840: Mr. AGUILAR.

H.R. 2883: Mr. OWENS.

H.R. 2891: Mr. BUDD.

H.R. 2903: Mr. EMMER, Mr. LANGEVIN, Mrs. MILLER-MEEKS, Mr. POCAN, Mr. RUSH, and Mr. SMITH of Washington.

H.R. 2974: Mr. CÁRDENAS.

H.R. 3031: Mrs. AXNE.

H.R. 3109: Mr. LUETKEMEYER.

H.R. 3198: Ms. SPANBERGER and Mr. MOORE of Utah.

H.R. 3203: Mr. LUETKEMEYER.

H.R. 3281: Mr. LONG.

H.R. 3305: Mr. LARSON of Connecticut and Mr. NORCROSS.

H.R. 3321: Mr. GIMENEZ and Mr. MOULTON.

H.R. 3342: Ms. SCANLON.

H.R. 3441: Mr. MRVAN, Mr. KIM of New Jersey, Ms. UNDERWOOD, and Ms. BLUNT ROCH-ESTER.

H.R. 3537: Mr. GOHMERT.

H.R. 3548: Ms. PINGREE.

H.R. 3665: Mr. MCCARTHY and Mr. GARCIA of California.

H.R. 3706: Mr. GARBARINO.

H.R. 3753: Ms. BLUNT ROCHESTER.

H.R. 3755: Ms. PLASKETT.

H.R. 3783: Mr. DEUTCH and Mr. LEVIN of Michigan.

H.R. 3807: Mr. YOUNG.

H.R. 3835: Ms. SALAZAR.

H.R. 3982: Mr. KELLER.

H.R. 4092: Mr. CARBAJAL and Ms. LEE of California.

H.R. 4099: Mr. SWALWELL and Ms. CHU.

H.R. 4135: Mr. YOUNG.

H.R. 4141: Mrs. HARTZLER.

H.R. 4402: Mr. KINZINGER, Mr. PALLONE, Ms. STANSBURY, Mr. DANNY K. DAVIS of Illinois, Mr. LANGEVIN, Mr. VARGAS, Miss RICE of New York, Ms. KUSTER, Mr. MCNERNEY, Mr. BISHOP of Georgia, Mr. SAN NICOLAS, Mr. DEFazio, Mr. DAVID SCOTT of Georgia, and Mr. PASCRELL.

H.R. 4429: Mr. WESTERMAN.

H.R. 4479: Mr. MCKINLEY.

H.R. 4526: Ms. ROSS.

H.R. 4558: Mr. KAHELE.

H.R. 4594: Mr. SABLAN, Mrs. WAGNER, and Mr. VEASEY.

H.R. 4645: Mr. GOODEN of Texas.

H.R. 4693: Mr. RODNEY DAVIS of Illinois, Ms. STANSBURY, Mrs. KIRKPATRICK, Ms. TITUS, Ms. STRICKLAND, and Mr. GOTTHEIMER.

H.R. 4785: Mr. OWENS, Ms. HERRERA BEUTLER, Mr. THOMPSON of Pennsylvania, Mr. BARR, Mr. MURPHY of North Carolina, Mr. VAN DREW, and Mr. WILSON of South Carolina.

H.R. 4805: Mr. AGUILAR.

H.R. 4816: Mr. VICENTE GONZALEZ of Texas.

H.R. 4862: Mr. MULLIN and Mr. LOUDERMILK.

H.R. 4866: Mr. MOONEY.

H.R. 4870: Ms. MALLIOTAKIS.

H.R. 4877: Mr. FITZPATRICK.

H.R. 4893: Mr. GRAVES of Missouri.

H.R. 4937: Mr. FITZPATRICK, Mr. KILMER, Mr. KIM of New Jersey, Mr. SOTO, and Ms. NORTON.

H.R. 4965: Mr. AGUILAR.

H.R. 4967: Mr. ROSE.

H.R. 4996: Mr. PHILLIPS and Mr. BISHOP of Georgia.

H.R. 5017: Mr. ALLRED.

H.R. 5048: Mr. AUCHINCLOSS.

H.R. 5067: Ms. WILD.

H.R. 5089: Mrs. LAWRENCE and Mr. KAHELE.

H.R. 5106: Mr. BABIN.

H.R. 5127: Mr. WOMACK.

H.R. 5131: Mr. AGUILAR.

H.R. 5162: Mrs. MCCLAIN.

H.R. 5231: Mrs. WALORSKI.

H.R. 5244: Mr. CALVERT, Mr. LIEU, Mrs. MCBATH, Mr. KILMER, Ms. KUSTER, and Mr. SEAN PATRICK MALONEY of New York.

H.R. 5294: Ms. VAN DUYN.

H.R. 5314: Mrs. TRAHAN and Mr. CASE.

H.R. 5326: Mr. CHABOT, Mr. CLINE, Mr. GONZALEZ of Ohio, Mr. MOONEY, and Mr. GOOD of Virginia.

H.R. 5327: Mrs. BOEBERT.

H.R. 5328: Mrs. BOEBERT.

H.R. 5338: Mr. KAHELE.

H.R. 5340: Mr. WOMACK.

H.R. 5342: Mr. LOWENTHAL.

H.J. Res. 28: Ms. SCANLON.

H.J. Res. 50: Mr. CALVERT.

H. Con. Res. 33: Mr. SIRES and Mr. HARRIS.  
H. Con. Res. 50: Mr. CLINE, Mr. WOMACK, Mr. MOORE of Utah, Mr. CRENSHAW, and Mr. BOST.

H. Res. 220: Mr. WOMACK.

H. Res. 382: Mrs. MILLER of West Virginia.

H. Res. 404: Mr. GARBARINO.

H. Res. 487: Mr. BROOKS.

H. Res. 586: Mr. RUSH.

H. Res. 605: Mr. ESPAILLAT, Mr. CORREA, and Ms. WILLIAMS of Georgia.

H. Res. 663: Mrs. MILLER-MEEKS.

H. Res. 665: Mr. GRIJALVA and Mr. LAN-GEVIN.

H. Res. 670: Mr. ALLRED, Mr. MFUME, Mr. BUTTERFIELD, Mr. McGOVERN, and Mr. KRISHNAMOORTH.

H. Res. 675: Mr. JOYCE of Ohio and Mr. KELLY of Pennsylvania.

H. Res. 676: Mr. STEIL and Mr. GUEST.

#### DISCHARGE PETITIONS— ADDITIONS AND WITHDRAWALS

The following Members added their names to the following discharge petitions:

Petition 2 by Mr. ROY on House Resolution 216: Mr. Brady, Mr. Smith of Missouri, Mr. Bucshon, Mr. Emmer, Mr. Mullin, Mr. Hudson, Ms. Granger, Mr. Barr, Mr. Gimenez, Mrs. Spartz, Mr. Kelly of Mississippi, Mr. Gallagher, Mr. Ellzey, Mr. Carl, Mr. Austin Scott of Georgia, Mrs. Hartzler, Mr. Rodney Davis of Illinois, Mr. Wenstrup, Mr. Steil, Mr. Curtis, Mr. Aderholt, Mr. Nehls, Mr. Johnson of South Dakota, Mr. Hollingsworth, and Mr. Reed.

Petition 3 by Mr. ROY on House Resolution 292: Mr. Pence.

Petition 4 by Mr. PERRY on House Resolution 160: Mr. Duncan, Mr. Hudson.

Petition 5 by Mr. MCHENRY on H.R. 3913: Mr. Kustoff.